

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name		Website	
Contact name. Primary applicant and contract manager	(Area code) Telephone number	Email (required)	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street)			
City		State	ZIP code
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

TODD M SOLBERG

PRINT or TYPE Name

X

Signature of business or organization representative

12/05/17 SPOKANE COUNTY

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
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7	Legal business name	Contact name	Email	(Area code) Phone number
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4564-1

ASSOCIATED CREDIT SERVICE, INCORPORATED
ASSOCIATED CREDIT SERVICE, INC.
12815 E SPRAGUE AVE # 200
SPOKANE VALLEY WA 99216-0742

DETACH BEFORE POSTING



STATE OF
WASHINGTON

Corporation

ASSOCIATED CREDIT SERVICE, INCORPORATED
ASSOCIATED CREDIT SERVICE, INC.
12815 E SPRAGUE AVE # 200
SPOKANE VALLEY, WA 99216-0742

UNEMPLOYMENT INSURANCE - ACTIVE
COLLECTION AGENCY - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

Unified Business ID #: 600019846

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

CITY ENDORSEMENTS:

SPOKANE VALLEY GENERAL BUSINESS - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

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13a

Company/Agency name Denper Group Inc		Website DenperGroup.com	
Contact name (Primary applicant and contact manager) Dennis Perry	(Area code) Telephone number 206 947 8505	Email (required) denpergroup@comcast.net	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 11902 124 Ave NE			
City Kirkland		State WA	ZIP code 98045
Mailing address of business (if different) 13720 460 Ave SE			
City North Bend		State WA	ZIP code 98045
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 601042893
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). we are in Automotive & Boat sales we will use it to verify lienholders on title ins and purchases</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>No</p>			

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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2-16-18 North Burien WA
Date and place (county) signed

Deanis Perry
PRINT or TYPE Name
☒ Signature of business or organization representative

Authorities:

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
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1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

DENPER GROUP, INC.
11902 124TH AVE NE
KIRKLAND, WA 98034

Unified Business ID #: 601042893

Business ID #: 001

Location: 0002

Expires: Mar 31, 2018

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
VESSEL DEALER #8525 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE
MOTOR VEHICLE DEALER #1423 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

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Vikki Smith

Director, Department of Revenue

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13a

Company/Agency name CASCADE FEDERAL CREDIT UNION		Website WWW.CASCADEFCU.ORG	
Contact name. Primary applicant and contract manager LORRIE FEBUS	(Area code) Telephone number 425-251-3600	Email (required) FEBUS@CASCADEFCU.ORG	
Contact name 2 (if applicable) ELIZABETH MEZHUA	(Area code) Telephone number 425-251-3600	Email (required) MEZHUA@CASCADEFCU.ORG	
Physical address of business (number and street) 18020 . 80TH AVENUE S.			
City KENT		State WA	ZIP code 98032
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 601134161
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>WE ARE A CREDIT UNION, A FINANCIAL INSTITUTION OFFERING LOANS ON TITLED VEHICLES, VESSELS, RECREATIONAL VEHICLES. WE PLACE LIENS ON TITLES USED AS COLLATERAL.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>WE WILL NOT DISCLOSE INFORMATION OR CONTACT THE OWNER. INFORMATION WOULD BE USED TO VERIFY LIEN PLACEMENT OR RELEASE. ALSO TO VERIFY DISCREPANCIES ON LIEN/TITLES.</p>			

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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2/15/18 KING COUNTY

Date and place (county) signed

LOPPIE FEBUS FOR CASCADE FCU
PRINT OR TYPE Name
X *[Signature]* for Cascade FCU

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
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Company/Agency name POTLATCH NO. 1 FEDERAL CREDIT UNION		Website	
Contact name. Primary applicant and contract manager Stacey Messick	(Area code) Telephone number 208-746-8900	Email (required) smessick@p1fcu.org	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1015 Warner Ave			
City Lewiston		State ID	ZIP code 83501
Mailing address of business (if different) PO Box 897			
City Lewiston		State ID	ZIP code 83501
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). FINANCIAL INSTITUTION ADD OR RELEASE LIENFOR TITLE COLLATERAL REQUEST PAPER TITLES			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. NO			

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- **Private investigator** – Attach a legible copy of your current private investigator license.

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<u>2/14/2018 NEZ PERCE CO.</u> Date and place (county) signed	<u>Stacey Messick</u> PRINT or TYPE Name X <u>Stacey Messick</u> Signature of business or organization representative
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Authorities:

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- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



BUSINESS & OCCUPATION LICENSE

POST IN A
CONSPICUOUS
PLACE

THIS LICENSE EXPIRES 12/31/2018

LICENSE NUMBER:
BL05-001332

THIS LICENSE IS ISSUED TO: POTLATCH #1 FEDERAL CREDIT UNION

Business Name and Mailing Address:

POTLATCH #1 FEDERAL CREDIT UNION
1015 WARNER AVE
LEWISTON, ID 83501

GENERAL BUSINESS

This license is granted upon the condition that the licensee conforms to all law of the United States and the State of Idaho, having reference to the business or occupation for which this license is granted, and to all orders, resolutions and ordinance of the City of Lewiston, Idaho, applicable to such business or occupation, and on further condition this license is not transferrable to any other person, firm, corporation or location. Description of approved business or occupation:

CREDIT UNION

LICENSED LOCATION: 1015 WARNER AVE

DATE EFFECTIVE: 01/01/2018

LICENSE FEE: \$ 323.00


CITY AUTHORIZATION SIGNATURE

This is your Business & Occupation License for the City of Lewiston, Idaho. This license must be displayed in a prominent location upon the licensed premises. **CHANGE OF LOCATION OR OWNER:** A change in business location or change in owners will automatically void this license and necessitate application and issuance of a new license. **EXPIRATION:** This license is issued for one year, unless indicated otherwise or revoked. **LICENSE RENEWAL:** Licenses issued for one year are to be renewed on or before the expiration date. It is your responsibility to notify the City of Lewiston of any change in mailing address to ensure that you receive your renewal notice or any other correspondence. Failure of any person to receive any such forms shall not excuse the person for making application and securing a license. **DELINQUENT:** Those licenses not renewed by the due date shall be considered delinquent and subject to a delinquent penalty. **OUT OF BUSINESS:** Notify the City of Lewiston of business closure and date of closure.

THIS LICENSE IS NOT TRANSFERRABLE TO ANY OTHER PERSON, FIRM, CORPORATION OR LOCATION.



Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cpe@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

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If you currently have a CPS number, enter it here _____

Company/Agency name Credit Concepts of WA, LLC		Website www.creditconcepts.com	
Contact name, Primary applicant and contract manager Kristin Piper	(Area code) Telephone number 253-613-6950 x 406	Email (required) kpiper@creditconcepts.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 22632 Hwy 99 Ste V			
City Edmonds		State WA	ZIP code 98026
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). We are an auto finance company, we will use these records to verify correct title transfers.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. No.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@doj.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2/14/18 *Quokomish only*
Date and place (county) signed

Kristin Piper
PRINT or TYPE Name

[Signature]
Signature of business or organization representative

Authorities:
Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Domestic Limited Liability Company

Unified Business ID #: 602 463 583
Business ID #: 1
Location: 1

CREDIT CONCEPTS OF WASHINGTON, LLC
CREDIT CONCEPTS
23632 HIGHWAY 99 STE V
EDMONDS WA 98026 9206

TAX REGISTRATION
INDUSTRIAL INSURANCE
UNEMPLOYMENT INSURANCE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:

CREDIT CONCEPTS

LICENSE NUMBER
BL-010015

CITY OF EDMONDS LICENSE

LICENSE YEAR
2018

Business License

This license must be displayed and may not be transferred or assigned.
Effective January 1 through December 31 of license year except where noted.

CREDIT CONCEPTS OF WASHINGTON LLC
23632 HIGHWAY 99
V
EDMONDS, WA 98026

BY:

(CITY CLERK SIGNATURE)

LICENSE ISSUE DATE
1/1/2018

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Email (quickest)**cps@dol.wa.gov**

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

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If you currently have a CPS number, enter it here _____

Company/Agency name Garry Fourre		Website NA	
Contact name. Primary applicant and contract manager Garry T. Fourre	(Area code) Telephone number 360 870 2873	Email (required) Garry4a@aol.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 6202 Puget Rd NE			
City Olympia		State Wa.	ZIP code 98516
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 601088015
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). I am a Recreational vehicle storage facility and will use this information to contact the owners that have abandoned their vehicles.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. I will use this information to send a certified letter to contact the owner. I will contact an attorney if necessary.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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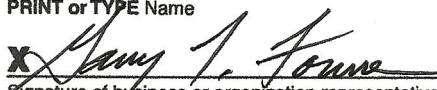
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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Garry T. Foure

PRINT or TYPE Name


Signature of business or organization representative

Feb. 13, 2018

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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cps@dol.wa.gov
Print and scan or upgrade to
Adobe Reader XI or above to fill it in
and save it.

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Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax
(360) 570-7895

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Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

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If you currently have a CPS number, enter it here

13a

Company/Agency name GT Investigations Inc		Website gtinvestigations.com	
Contact name Primary applicant and contract manager Joe Griffin	(Area code) Telephone number 509 836 1421	Email (required) gtinvestigations@yahoo.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 22 W Mission Ave Ste 116			
City Spokane WA		State WA	ZIP code 99201
Mailing address of business (if different) SAME			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Private investigations - criminal & civil locates, verification & backgrounds</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>Per subpoena or through discovery</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners—RCW 46.12.635(1)(c).

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Submit the following documentation with your application:

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2/12/18 Spokane County

Date and place (county) signed

PRINT or TYPE Name

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

G/T INVESTIGATIONS, INC.
G T PROCESS SERVICE
222 W MISSION AVE
SPOKANE, WA 99201-2344

TAX REGISTRATION - ACTIVE

Unified Business ID #: 602462278

Business ID #: 001

Location: 0002

Expires: Jan 31, 2019

CITY ENDORSEMENTS:

SPOKANE GENERAL BUSINESS #T12038935BUS - ACTIVE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue



STATE OF
WASHINGTON

Office of the Secretary of State
Corporations Division

LEGAL ENTITY REGISTRATION

G/T INVESTIGATIONS, INC.
422 W RIVERSIDE STE 1100
SPOKANE, WA 99201

Unified Business ID #: 602462278

Expiration: Jan-31-2019

Domestic Profit Corporation

Renewed by Authority of Secretary of State

By accepting this document the recipient certifies that information provided on the annual report was complete, true, and accurate to the best of his or her knowledge, and that the company will stay in compliance with all applicable Washington State regulations.

Secretary of State

Vehicle/Vessel On-line Access Contract Application-CPS

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name BT Process Service		Website btinvestigations.com	
Contact name, Primary applicant and contract manager Joe Griffin	(Area code) Telephone number 509 8381421	Email (required) btinvestigation@yahoo.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 222 W Mission Ave Ste 110			
City Spokane		State WA	ZIP code 99201
Mailing address of business (if different) SAME			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	EIN 6d	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p style="text-align: center; font-size: 1.2em;">LEGAL PROCESS SERVICE</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p style="text-align: center; font-size: 1.2em;">Serve them legal court documents</p>			

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- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2/2/18 Spokane County Joe Griffin
Date and place (county) signed PRINT or TYPE Name
X Joe Griffin
Signature of business or organization representative

Authorities:

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
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If you currently have a CPS number, enter it here

13a

Company/Agency name Heckman Motors Inc		Website	
Contact name. Primary applicant and contract manager Jack Heckman	(Area code) Telephone number 360.460.1073	Email (required) jackheckman@olypen.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 111 E. Front Street			
City Port Angeles		State WA	ZIP code 98362
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 600016076
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Management and parking enforcement for parking lots owned by Clallam Transit and City of Port Angeles. Information needed to contact owners of vehicles given "parking notice fee"			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. Yes- Vehicles parking without advance payment, overtime, improperly, or unauthorized will contact via USPS			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Jack Heckman

PRINT or TYPE Name

02-06-18 Clallam County

Date and place (county) signed

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

HECKMAN MOTORS, INC.
BUDGET RENT-A-CAR PORT ANGELES
111 E FRONT ST
PORT ANGELES, WA 98362-2906

UNEMPLOYMENT INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
TAX REGISTRATION - ACTIVE

Unified Business ID #: 600016076

Business ID #: 001

Location: 0003

Expires: Mar 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
RENTAL CAR REGISTRATION #R61360 - ACTIVE
MOTOR VEHICLE DEALER #1114 - ACTIVE

DUTIES OF MINORS:

PARKING ATTENDANT, CAR WASHING

LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

3/21/17 Forward to Manheim 253-395-2272

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name Dameron Ford		Website www.dameronford.com	
Contact name, Primary applicant and contract manager Jessica Meyers	(Area code) Telephone number 503.530.2629	Email (required) Jessica@beavertonauto.com	
Contact name 2 (if applicable) Bonita Nowatzki	(Area code) Telephone number 503.530.2698	Email (required) Bonnie@dameronford.com	
Physical address of business (number and street) 12325 SN Canyon Rd.			
City Beaverton		State OR	ZIP code 97005
Mailing address of business (if different) PO Box 161			
City Beaverton		State OR	ZIP code 97075
Provide one of these identifiers	6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We are a car dealership. We used the records to verify ownership when a vehicle is traded in.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>We would only contact our customer to ensure we have proper documentation from them. We would not provide the information to anyone else.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2/10/18 Washington County
Date and place (county) signed Oregon

Jessica Meyers
PRINT or TYPE Name

X [Signature]
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)

Each data broker or reseller must:

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

VEHICLE DEALER CERTIFICATE

DA1503

EFFECTIVE: NOVEMBER 1, 2017

EXPIRES: NOVEMBER 30, 2020

Issued To:

**DAMEROW FORD CO
DBA: DAMEROW FORD
12325 SW CANYON RD
BEAVERTON OR 97005**

This business is authorized to engage in buying, selling, or dealing in new or used vehicles in the state of Oregon under the provisions of ORS 822.020, and to exercise privileges granted by certificate under the provisions of ORS 822.040.

To be valid, this certificate must be prominently posted at the business address listed above and is not valid at any other location. It is not valid if expired, revoked, canceled or suspended, under the provisions of ORS 822.045 and ORS 822.050.

*Driver and Motor Vehicle Services
Department of Transportation
Salem OR 97314*

*** ALTERATION, MUTILATION OR ERASURE WILL VOID CERTIFICATE ***

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here _____

13a

Company/Agency name <i>Progressive Insurance</i>		Website	
Contact name, Primary applicant and contract manager <i>DAVID DARE</i>	(Area code) Telephone number <i>440-910-0775</i>	Email (required) <i>DDARE@Progressive.com</i>	
Contact name 2 (if applicable) <i>Ryan Briceand</i>	(Area code) Telephone number <i>440-910-0755</i>	Email (required) <i>Ryan_K_Briceand@Progressive.com</i>	
Physical address of business (number and street) <i>625 Alpha Drive</i>			
City <i>HIGHLAND HTS,</i>		State <i>OHIO</i>	ZIP code <i>44143</i>
Mailing address of business (if different) <i>Same</i>			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN) <i>Same on File</i>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><i>Insurance Company uses System to gain Documents used to Evaluate liability and bring claims to resolution.</i></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>We may contact owners via telephone, mail, or Email. We would contact owners for the purpose of investigating Suspected Fraud insurance claims.</i></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Feb. 6, 2018
Date and place (county) signed

DAVID DARE
PRINT or TYPE Name
x David Dare
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

Effective Date: December 11, 1956

Expiration Date: June 30, 2015

State of Ohio
Department of Insurance
Certificate of Authority

This is to Certify, that

PROGRESSIVE CASUALTY INSURANCE COMPANY

NAIC No. 24260

is organized under the laws of this State as of November 17, 1956 and is authorized to issue policies and transact business under the following section(s) of the Ohio Revised Code:

Section 3929.01 (A)

Aircraft	Ocean Marine
Allied Lines	Other Liability
Boiler & Machinery	Private Passenger Auto - Liab
Burglary & Theft	Private Passenger Auto-Other
Commercial Auto - Liability	Private Passenger-Phys Damage
Commercial Auto - No Fault	Surety
Commercial Auto - Phys Damage	
Credit	
Earthquake	
Fidelity	
Fire	
Glass	
Inland Marine	
Medical Malpractice	
Multiple Peril - Commercial	
Multiple Peril - Farmowners	
Multiple Peril - Homeowners	

This Certificate of Authority is subject to the laws of the State of Ohio.



John R. Kasich, Governor

Mary Taylor

Mary Taylor, Lt. Governor/Director

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

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cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.
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If you currently have a CPS number, enter it here **13a**

Company/Agency name Honda of Fife		Website www.HondaofFife.com	
Contact name. Primary applicant and contract manager Brittanie Pivinski	(Area code) Telephone number 253-922-2673	Email (required) Brittanie@hondaoffife.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 4301 20th St. E			
City Fife		State WA	ZIP code 98424
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). New and used car dealership. Honda of Fife will use the vehicle/vessel records to verify if there is a lien holder or 2nd registered owner is on file if a vehicle is being traded into Honda of Fife.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>No.</p>			

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name DBA Honda of FR Dean Lee Inc.	Contact name Brittanie Pivinski	Email Brittanie@hondaoffr.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E FR, WA 98424		Subscriber's permissible use Verify legal/registered owners for vehicles traded in or purchased at Honda of FR	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name DBA Honda of FR Dean Lee Inc.	Contact name John Short	Email	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E FR, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name DBA Honda of FR Dean Lee Inc.	Contact name Chris Wolfe	Email cwolfe@hondaoffr.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E FR, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
4	Legal business name DBA Honda of FR Dean Lee Inc.	Contact name Dennis Lee	Email Dlee@hondaoffr.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E FR, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5	Legal business name DBA Honda of FR Dean Lee Inc.	Contact name Tom Bryant	Email Tom@hondaoffr.com	(Area code) Phone number 253-922-2673
	Address, City, State, Zip code 4301 20th St. E FR, WA 98424		Subscriber's permissible use Same As Above	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

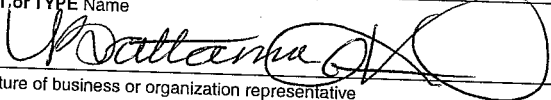
CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/29/2018 File, WA
Date and place (county) signed

Brittanie Pivinski
PRINT, or TYPE Name
X 
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON
Corporation

BUSINESS LICENSE

Unified Business ID #: 601131296
Business ID #: 001
Location: 0001
Expires: Nov 30, 2018

DEAN LEE, INC.
HONDA OF FIFE
4301 20TH ST E
FIFE, WA 98424-1848

UNEMPLOYMENT INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
MOTOR VEHICLE DEALER #3572 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

CITY ENDORSEMENTS:

FIFE GENERAL BUSINESS - ACTIVE

DUTIES OF MINORS:

FILING, WASHING CARS, BLDG MAINT, ANSWER PHONES. *SERVICE OCCUPATIONS: IF A MINOR WORKS PAST 8:00 P.M.: MINOR MUST BE SUPERVISED BY A RESPONSIBLE ADULT EMPLOYEE WHO MUST REMAIN ON PREMISE AT ALL TIMES.*

LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

REGISTERED TRADE NAMES:

HONDA OF FIFE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Vikki Smith

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 601131296 001 0001

Expires: Nov 30, 2018

DEAN LEE, INC.
HONDA OF FIFE
4301 20TH ST E
FIFE, WA 98424-1848

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
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Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a -DOL Account Number

Company/Agency name <i>Mayflower Metals, Inc.</i>		Website <i>www.mayflowermetals.com</i>	
Contact name. Primary applicant and contract manager <i>Brian Green</i>	(Area code) Telephone number <i>(509) 786-1818</i>	Email (required) <i>briang@mayflowermetals.com</i>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <i>139406 W Johnson Rd.</i>			
City <i>Prosser</i>		State <i>WA</i>	ZIP code <i>99350</i>
Mailing address of business (if different) <i>PO Box 84</i>			
City <i>Prosser</i>		State <i>WA</i>	ZIP code <i>99350</i>
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><i>We are a Scrap Metal Processor, a Hulk Hauler, and Motor Vehicle Salvage Processor. We are a metal recycling business that accepts scrap metal, including vehicles, semi trucks, trailers of various sizes, and motorcycles. We do not except boats unless they are primarily made of metal and not fiberglass, carbon fiber, or other materials that are not metal.</i></p> <p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>We would only do a CPS search when a vendor is bringing in a vehicle to be sold as scrap. During the process of purchasing the vehicle for scrap, we collect the vendors name, address, phone number, driver's license number, and a scan of their driver's license, and signature. How we see it is, if we are presented with any information on a vehicle that show any theft or criminal information we will contact the proper authorities, if needed. Then we ask the authorities regarding contact with the owner. We have contacted our local Wrecking Inspector, Tropper Michael K. Wells, of the Washington State Patrol, regarding the proper procedure with accepting vehicles for scrap in relation to the procedure with CPS (IUIPS).</i></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

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 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/23/2018 Benton County
Date and place (county) signed

Brian Green
PRINT or TYPE Name
X
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
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**Vehicle/Vessel On-line Access
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.**Mail**Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507**Fax**

(360) 570-7895

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We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here **13a**

Company/Agency name EVERETT BAYSIDE MARINE		Website BAYSIDEMARINE.COM	
Contact name. Primary applicant and contract manager DAN HATCH	(Area code) Telephone number 425-212-2241	Email (required) DAN@BAYSIDEMARINE.COM	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1111 CRAFTSMAN WAY			
City EVERETT		State WA	ZIP code 98201
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) C 600-603-639
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). BOAT AND TRAILER SALES, NEW AND USED CONSIGNMENT BOAT REPAIR AND PARTS SALES BOAT STORAGE			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. WILL NOT DISCLOSE ANY INFORMATION TO ANY PERSON OR BUSINESS INFORMATION ONLY USED TO CONFIRM CORRECT VIN AND HIN NUMBERS AND TO CONFIRM REGISTERED AND LEGAL OWNERS PRIOR TO SELLING AND TRANSFERRING TITLE			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

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01/23/2018 SNOHOMISH

Date and place (county) signed

DAN HATCH

PRINT or TYPE Name

X

Signature of business or organization representative

Authorities:

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
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1	Legal business name EVERETT BAYSIDE MARINE INC	Contact name Dan Hatch	Email dan@baysidemarine.com	(Area code) Phone number 425-212-2241
	Address, City, State, Zip code 1111 CRAFTSMAN WAY, EVERETT WA 98201		Subscriber's permissible use FULL USE	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
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If you currently have a CPS number, enter it here

13a

Company/Agency name A-AFFORDABLE BAIL BONDS LLC		Website A-Affordablebailbonds.com	
Contact name, Primary applicant and contract manager Bryan Nester	(Area code) Telephone number 360 699-3100	Email (required) B.Nester@A-Affordablebailbonds.com	
Contact name 2 (if applicable) Knute Soleim	(Area code) Telephone number 360 353-8184	Email (required) Knute@A-Affordablebailbonds.com	
Physical address of business (number and street) 615 W 11th St.			
City Vancouver		State WA.	ZIP code 98660
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 602 196 197
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Verify accuracy information, verify ownership of a vehicle. Bail Bonds. Take vehicles as collateral at times.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. may use information to contact or locate a defendant or cosigner.			

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1/23/18 CLARK
Date and place (county) signed

Bryan Nester
PRINT or TYPE Name
☒ Signature of business or organization representative

Authorities:

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
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Print and scan or upgrade to
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and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing **Adobe**
PO Box 2957
Olympia, WA 98507

Fax
(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here _____

13a

Company/Agency name Reliable Credit Association Inc. (WA)		Website Reliablecredit.com	
Contact name. Primary applicant and contract manager Tracy Daniels	(Area code) Telephone number 425-778-7000	Email (required) tdaniels@reliablecredit.com	
Contact name 2 (If applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 5031 168 th St SW Suite 185			
City Lynnwood		State WA	ZIP code 98258
Mailing address of business (if different) Box 836			
City Lynnwood		State WA	ZIP code 98258
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 601-568-688
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Title look up to confirm lien has been perfected. Title look up to confirm registered owner status.</p>			

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. Only if required to obtain proper title documents.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- s **Washington State business** – Attach a legible copy of your current business license
- s **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- s **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Services
- s **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- s **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Tracy Daniels

PRINT or TYPE Name

1/22/18 Snohomish

Date and place (county) signed

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725

Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02

Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)

Each data broker or reseller must:

s -MAINTAIN A LEGIBLE SUBSCRIBER ROSTER AND COMPLETE

ALL FIELDS s RECORD ALL SUBSCRIBERS s DOCUMENT

THE SPECIFIC PERMISSIBLE USE QUALIFICATION FOR EACH

SUBSCRIBER

s RETAIN SUBSCRIBER ROSTER AND NOTIFICATION LETTERS SENT BY SUBSCRIBERS FOR THE TERM OF THE CONTRACT AND FOR THREE YEARS from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name Reliable Credit Association Inc (WA)	Contact name Serena Dingel	Email smdingel@reliablecredit.com	(Area code) Phone number 425 778 7000
	Address, City, State, Zip code 5031 168th St SW Suite 185 Lynnwood WA 98046		Subscriber's permissible use Title look up to confirm lien perfected or confirm registered owner.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number

	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No				
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No				

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



City of Lynnwood
4114 198th ST SW / P.O. Box 5008
Lynnwood, WA 98046-5008
(425) 670-5421
www.lynnwoodwa.gov

BUSINESS LICENSE CERTIFICATE

(YOUR LOCAL SALES TAX CODE IS 3110)

Business Name: RELIABLE CREDIT ASSOC INC

Business Type(s): 522220 Sales Financing

Business Location: 5031 168TH ST SW STE 185
LYNNWOOD, WA 98037

Mailing Address: PO BOX 836
LYNNWOOD, WA 98046

Owner:

License Number: 004460-01-2000

License Type: Resident

Issued Date: 1/2/2018

Classification: Resident Business License

Expiration Date: 1/2/2019

Fees Paid: \$2,290.50

Community Development Director

A great deal more

NOT TRANSFERABLE OR ASSIGNABLE.

THIS LICENSE MUST BE POSTED IN PUBLIC VIEW AT THE BUSINESS LOCATION.

RELIABLE CREDIT ASSOC INC

PO BOX 836
LYNNWOOD, WA 98046

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

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If you currently have a CPS number, enter it here

13a

Company/Agency name Sergeants Towing Inc		Website www.sergeantstowing.com	
Contact name. Primary applicant and contract manager Amanda J. Ferree	(Area code) Telephone number (503)281-1948	Email (required) amanda@sergeantstowing.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 2045 N. Vancouver Ave.			
City Portland		State OR	ZIP code 97227
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We are a towing company. Information obtained will be used to notify registered owners and lien holders of the vehicles impoundment.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The owners will be contacted via certified mail to notify them of the vehicles impoundment.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private Investigator** – Attach a legible copy of your current private investigator license.

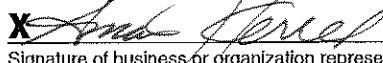
By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Amanda J. Ferree

PRINT or TYPE Name

01/21/2018 Multnomah County Oregon

Date and place (county) signed



Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



CITY OF PORTLAND
OFFICE OF MANAGEMENT AND FINANCE
BUREAU OF REVENUE AND FINANCIAL SERVICES

Ted Wheeler, Mayor
Ken Rust, Chief Financial Officer
Thomas W. Lannom, Revenue Division Director

Terri Williams, Manager
Tax Division
Revenue Division
111 SW Columbia Street, Suite 600
Portland, Oregon 97201-5840
(503) 823-5157
FAX (503) 823-5192
TDD (503) 823-6868



April 4, 2017

SERGEANTS TOWING INC
DBA SECURITY TOWING & RECOVERY LLC
2045 N VANCOUVER AVE
PORTLAND OR 97227-1964

Account Number
425102

RE: Certificate of Compliance

Questions? Call (503) 865-2478

 MULTNOMAH COUNTY	CERTIFICATE OF COMPLIANCE REVENUE DIVISION – TAX DIVISION, 111 SW COLUMBIA ST., SUITE 600, PORTLAND, OR 97201-5840 PHONE: (503) 823-5157, FAX: (503) 823-5192, TDD: (503) 823-6868	
ACCOUNT: 425102		DATE ISSUED: April 4, 2017
TAXFILER: SERGEANTS TOWING INC DBA SECURITY TOWING & RECOVERY LLC 2045 N VANCOUVER AVE PORTLAND OR 97227-1964		<i>Verify compliance at www.portlandoregon.gov/biztax</i>
LOCATION: 12175 N NORTH PORTLAND RD PORTLAND OR 97217		
Is in compliance with the City of Portland Business License Tax Law and Multnomah County Business Income Tax Law as of April 4, 2017.		
<small>A Certificate of Compliance indicates that on the date of issuance the business was in compliance with applicable tax laws. It does not exempt the holder from annual filing requirements, nor does it entitle the holder to engage in any business activity not otherwise allowed by federal, state, and/or local laws.</small>		
REVBUR.12/09		

An Equal Opportunity Employer
To help ensure equal access to programs, services and activities,
the Office of Management & Finance will reasonably modify policies/procedures and provide auxiliary
aids/services to persons with disabilities upon request.
www.portlandoregon.gov/revenue

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

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If you currently have a CPS number, enter it here **13a**

Company/Agency name GRANGE INSURANCE ASSOCIATION		Website www.grange.com	
Contact name, Primary applicant and contract manager CARRON L LAFORCE	(Area code) Telephone number 206-753-4392	Email (required) carron.laforce@grange.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 200 CEDAR STREET			
City SEATTLE		State WA	ZIP code 98121
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Personal lines insurer.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We will contact the owner for insurance purposes only and may, depending on the investigation, forward this information to an attorney for investigation or settlement purposes. We may contact the owner via US Mail, phone, email, or text.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Carron L LaForce

PRINT or TYPE Name

X 
Signature of business or organization representative

January 19, 2018

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725

Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02

Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

MASTER LICENSE SERVICE
PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400
REGISTRATIONS AND LICENSES

Unified Business ID #: 600 175 994
Business ID #: 1
Location: 1

GRANGE INSURANCE ASSOCIATION
200 CEDAR ST
SEATTLE WA 98121 1223

TAX REGISTRATION
INDUSTRIAL INSURANCE

UNEMPLOYMENT INSURANCE

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for these licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.


Director, Department of Licensing

Vehicle/Vessel On-line Access Contract Application-CPS

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Vehicle Records Disclosure Unit

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PO Box 2957

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name First American Title		Website	
Contact name, Primary applicant and contract manager Heather Shurtliff	(Area code) Telephone number 509-248-7650	Email (required) hshurtliff@firstam.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 4710 Summitview # 204			
City Yakima	State WA	ZIP code 98908	
Mailing address of business (if different)			
City	State	ZIP code	
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Title Company- We use the System to verify Registered and legal owners of Mobile Homes</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>NO</p>			

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 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

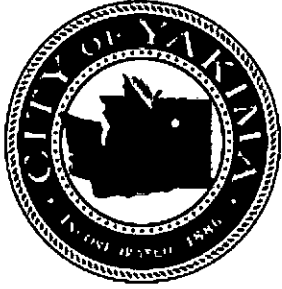
By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

<u>1/17/18</u> Date and place (county) signed	<u>Heather Shurtell</u> PRINT or TYPE Name <input checked="" type="checkbox"/> <u>Heather Shurtell</u> Signature of business or organization representative
--	--

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

CITY OF YAKIMA LICENSE



License #
BL076743

UBI #
600213895

Persons
17

License Fee
\$321.15

FOR: Comm Bus Lic Within City of Yakima

LOCATION: 4710 SUMMITVIEW AVE #204

ISSUED ON: January 01, 2018

VALID TO: December 31, 2018

I
S
S
U
E
D

FIRST AMERICAN TITLE
4710 SUMMITVIEW AVE #204
YAKIMA, WA 98908

The issuance of this license is a tax on your business activity and does not entitle you to conduct business in violation of any other federal, state or local laws.

CITY OF YAKIMA LICENSE

NAME: FIRST AMERICAN TITLE

FOR: Comm Bus Lic Within City of Yakima

LICENSE: BL076743

FEE: \$321.15

EXPIRES: 12/31/2018

NOT TRANSFERABLE

CITY OF YAKIMA LICENSE

For: Comm Bus Lic Within City of Yakima

DBA Name: FIRST AMERICAN TITLE

Location: 4710 SUMMITVIEW AVE #204
YAKIMA, WA 98902

Amount: \$321.15

License #: BL076743

Payment Method: Online Payment

Date: 12/26/2017

RECEIPT

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in

and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here _____

13a

Company/Agency name Rainier Dodge Inc		Website www.rainierdodge.com	
Contact name, Primary applicant and contract manager Cindy Richeson	(Area code) Telephone number 360-754-5550	Email (required) cricheson@rainierdodge.com	
Contact name 2 (if applicable) Cesare Johnson	(Area code) Telephone number 360-754-5550	Email (required) cjohnson@rainierdodge.com	
Physical address of business (number and street) 2550 Carriage Ln SW			
City Olympia	State WA	ZIP code 98502	
Mailing address of business (if different)			
City	State	ZIP code	
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Auto Dealer. We use vehicle records to check reg. owners & legal owners so we get all required signatures. Also to see what bank to payoff.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>we would only contact the customer/owner if we need further documentation signed. we may call, email, or even mail to contact the owner. we would not provide the information to any other person/business.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1-17-18 Thurston

Date and place (county) signed

PRINT or TYPE Name

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name <i>Rainier Dodge</i>	Contact name <i>Cindy Richeson</i>	Email <i>cricheson@rainierdodge.com</i>	(Area code) Phone number <i>360-754-5550</i>
	Address, City, State, Zip code <i>2550 Carriage Ln SW Olympia WA 98502</i>		Subscriber's permissible use <i>check legal owner for payoff used to make sure we have all releases to sell vehicle.</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name <i>Rainier Dodge</i>	Contact name <i>Debra Binion</i>	Email <i>debrabinion@gmail.com</i>	(Area code) Phone number <i>360-754-5550</i>
	Address, City, State, Zip code <i>2550 Carriage Ln SW Olympia WA 98502</i>		Subscriber's permissible use <i>info used to ensure we have all proper releases to sell vehicle</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF
WASHINGTON
Corporation

BUSINESS LICENSE

Unified Business ID #: 600554884
Business ID #: 001
Location: 0001
Expires: Mar 31, 2018

RAINIER DODGE, INC.
RAINIER DODGE
2550 CARRIAGE LOOP DR
OLYMPIA, WA 98502

UNEMPLOYMENT INSURANCE - ACTIVE
RENTAL CAR REGISTRATION #R61375 - ACTIVE
MOTOR VEHICLE DEALER #1156 (EXPIRES
10/31/2018) - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

CITY ENDORSEMENTS:

OLYMPIA GENERAL BUSINESS #1804 (EXPIRES 10/31/2018) - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Vikki Smith

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 600554884 001 0001

Expires: Mar 31, 2018

RAINIER DODGE, INC.
RAINIER DODGE
2550 CARRIAGE LOOP DR
OLYMPIA, WA 98502

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
RENTAL CAR REGISTRATION
#R61375 - ACTIVE
TAX REGISTRATION - ACTIVE
MOTOR VEHICLE DEALER #1156
(EXPIRES 10/31/2018) - ACTIVE

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

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Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name JRT Auto Inc DBA Mazda of Everett		Website	
Contact name, Primary applicant and contract manager Cindy Ashbridge	(Area code) Telephone number (425) 353-3403	Email (required) Cashbridge@mazdaofeverett.com	
Contact name 2 (if applicable) Andrea Green	(Area code) Telephone number (425) 353-3403	Email (required) AndreaK@mazdaofeverett.com	
Physical address of business (number and street) MAZDA OF EVERETT 11409 HWY-99 EVERETT, WA 98204 425-353-3403			
City		State	ZIP code
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Transit Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 602-885-976
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <div style="font-size: 1.2em; color: blue; text-align: center;">We are a new /used Auto Dealership</div>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <div style="font-size: 1.2em; color: blue; text-align: center;">We would only contact Customer if there was an issue that need them to take Care of Like a 2nd Reg owner or Legal owner undisclosed.</div>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1-17-2018 Snoh CO.
Date and place (county) signed

Cindy Ashbridge
PRINT or TYPE Name

X Cindy Ashbridge
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
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Washington Administrative Code (WAC) 308-10-075, 308-93-087

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- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name JRS Auto Inc DAA Mazda of Everett	Contact name Cindy Ashbridge	Email Cashbridge@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
2	Legal business name Same as above	Contact name Dee Lopez	Email Dee@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
3	Legal business name Same as above	Contact name Jennifer McCann	Email Jennmccann@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
4	Legal business name Same as Above	Contact name Tony Keel	Email TKeel@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code Same as Above			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
5	Legal business name Terad McCann	Contact name Mazda of Everett	Email Terad@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
6	Legal business name Mazda of Everett	Contact name Mike Olmsted	Email MikeO@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Everett, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
7	Legal business name Mick Jones	Contact name Mazda of Everett	Email mick@mazdaofeverett.com	(Area code) Phone number 425-353-3403
Address, City, State, Zip code 11409 Hwy 99 Evergreen, WA 98204			Subscriber's permissible use	
Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

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STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

JRJ AUTO, INC.
MAZDA OF EVERETT
11409 HIGHWAY 99
EVERETT, WA 98204

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

Unified Business ID #: 602885976

Business ID #: 001

Location: 0001

Expires: Dec 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
MOTOR VEHICLE DEALER #2984 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:

MAZDA OF EVERETT

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

UBI: 602885976 001 0001

JRJ AUTO, INC.
MAZDA OF EVERETT
11409 HIGHWAY 99
EVERETT, WA 98204

STATE OF WASHINGTON

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
MOTOR VEHICLE DEALER #2984 -
ACTIVE

Expires: Dec 31, 2018



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Email (quickest)
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If you currently have a CPS number, enter it here

13a

Company/Agency name BECU		Website	
Contact name. Primary applicant and contract manager Sheila A Smyre	(Area code) Telephone number 206-436-1399	Email (required) Sheila.Smyre@BECU.org	
Contact name 2 (if applicable) Boyd Vanderkleeft	(Area code) Telephone number 206-438-5008	Email (required) boyd.vanderkleeft@BECU.	
Physical address of business (number and street) 12770 Gateway BR Mail stop 1080-2			
City Tukwila		State WA	ZIP code 98168
Mailing address of business (if different) PO Box 97050			
City Seattle		State WA	ZIP code 98124
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Credit Union - use for verification of collateral for consumer lending			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. Owners have already contacted us for a loan - only reach out to them if BECU is not listed as a lien holder as agreed			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/16/18 King County
Date and place (county) signed

Sheila A Smyre, Manager Consumer Loan Servicing
PRINT or TYPE Name
X Sheila A Smyre
Signature of business or organization representative
Manager, Consumer Loan Servicing

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
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1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF
WASHINGTON

BUSINESS LICENSE

Unified Business ID #: 603342832

Business ID #: 001

Location: 0001

Expires: Feb 28, 2018

Limited Liability Company

SEATTLE POWERSPORTS, LLC
LAWLESS HARLEY-DAVIDSON OF RENTON
3715 E VALLEY RD
RENTON, WA 98057

UNEMPLOYMENT INSURANCE - ACTIVE
MINOR WORK PERMIT (EXPIRES 10/31/2018) -
ACTIVE
MOTOR VEHICLE DEALER #10133 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
MISCELLANEOUS VEHICLE DEALER #6107 (EXPIRES
10/31/2018) - ACTIVE

DUTIES OF MINORS:

ENTRY LEVEL PART TIME WORK. CASHIERING, CLERICAL, STOCKING PRODUCT, ETC.

LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

REGISTERED TRADE NAMES:

DOWNTOWN HARLEY-DAVIDSON
LAWLESS HARLEY-DAVIDSON OF RENTON
SEATTLE HARLEY-DAVIDSON

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here _____

Company/Agency name Seattle Powersports LLC dba Lawless Harley Davidson		Website	
Contact name. Primary applicant and contract manager Colleen R Fain	(Area code) Telephone number 425 988 2005	Email (required) cfain@lawless-hd.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 3715 E Valley rd			
City Benton		State WA	ZIP code 98057
Mailing address of business (if different) same as above			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) U03342832
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Buy / sell New used motorcycles. Verify registered owner status / Title status / Lienholder status			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. NO			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.


CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/12/18 King County
Date and place (county) signed

Lolita R Fair
PRINT or TYPE Name
X 
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

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If you currently have a CPS number, enter it here 13a

Company/Agency name PEH SERVICES		Website WWW.EYEOFWA.COM	
Contact name. Primary applicant and contract manager PAUL HILDEBRAND	(Area code) Telephone number 509.833.3046	Email (required) PIYAKIMA@JUNO.COM	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 5808 SUMMITVIEW AVE #A218			
City YAKIMA		State WA	ZIP code 98908
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 603254059
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). PRIVATE INVESTIGATIONS AND SERVICE OF PROCESS. WILL USE TO IDENTIFY AND VERIFY SUBJECTS WHOM I AM ATTEMPTING TO LOCATE.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. I WILL CONTACT OWNER TO SERVE COURT PAPERS WHEN APPLICABLE. I WILL CONTACT AND PROVIDE TO ATTORNEYS ALSO WHEN APPLICABLE.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.


CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1-11-2018 YAKIMA
Date and place (county) signed

PAUL HILDEBRAND
PRINT or TYPE Name

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Sole Proprietorship

PAUL ERIK HILDEBRAND
PEH SERVICES
5808 SUMMITVIEW AVE
YAKIMA, WA 98908-3095

Unified Business ID #: 603254059

Business ID #: 001

Location: 0001

Expires: Dec 31, 2018

PRIVATE INVESTIGATIVE AGENCY - ACTIVE

TAX REGISTRATION - ACTIVE

PRIVATE INVESTIGATIVE AGENCY PRINCIPAL: HILDERBRAND, PAULERIK

REGISTERED TRADE NAMES:

EYE OF WASHINGTON

PEH SERVICES

PRIVATE EYE OF WASHINGTON

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

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If you currently have a CPS number, enter it here 13a

Company/Agency name Seattle Auto Management, Inc.		Website mbseattle.com	
Contact name. Primary applicant and contract manager Samantha Hicks	(Area code) Telephone number 206-467-9999	Email (required) samanthahicks@mbseattle.com	
Contact name 2 (if applicable) Janelle Markevitch	(Area code) Telephone number 206-467-9999	Email (required) janellem@mbseattle.com	
Physical address of business (number and street) 2025 Airport Way South			
City Seattle		State Wa	ZIP code 98134
Mailing address of business (if different) Same as above			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>New and used vehicle sales. Plate searches will be used for verifying the legal owner of a used car before allowing someone to sell or trade a vehicle to us.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The owner would be in our business in person, so no other contact would be necessary.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

01-11-18 / SEATTLE, WA
Date and place (county) signed

SAMANTHA R. HICKS
PRINT or TYPE Name
X [Signature]
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name Seattle Auto Management, Inc.	Contact name Samantha Hicks	Email samanthahicks@mbseattle.com	(Area code) Phone number 206-467-9999
	Address, City, State, Zip code 2025 Airport Way South, Seattle, Wa 98134		Subscriber's permissible use Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name Seattle Auto Management, Inc.	Contact name Janelle Markevitch	Email janellem@mbseattle.com	(Area code) Phone number 206-467-9999
	Address, City, State, Zip code 2025 Airport Way South, Seattle, Wa 98134		Subscriber's permissible use Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name Seattle Auto Management, Inc.	Contact name Morten Bjerregaard	Email mortenb@mbseattle.com	(Area code) Phone number 206-467-9999
	Address, City, State, Zip code 2025 Airport Way South, Seattle, Wa 98134		Subscriber's permissible use Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
4	Legal business name Seattle Auto Management, Inc.	Contact name Denis Ivankin	Email denisivankin@mbseattle.com	(Area code) Phone number 206-467-9999
	Address, City, State, Zip code 2025 Airport Way South, Seattle, Wa 98134		Subscriber's permissible use Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5	Legal business name Seattle Auto Management, Inc.	Contact name Cole Gorman	Email colegorman@mbseattle.com	(Area code) Phone number 206-467-9999
	Address, City, State, Zip code 2025 Airport Way South, Seattle, Wa 98134		Subscriber's permissible use Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
6	Legal business name Seattle Auto Management, Inc.	Contact name Blanca Dalida	Email blancadalida@mbseattle.com	(Area code) Phone number 206-467-9999
	Address, City, State, Zip code 2025 Airport Way South, Seattle, Wa 98134		Subscriber's permissible use Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
7	Legal business name Seattle Auto Management, Inc.	Contact name Emily Soma	Email emilysoma@mbseattle.com	(Area code) Phone number 206-467-9999
	Address, City, State, Zip code 2025 Airport Way South, Seattle, Wa 98134		Subscriber's permissible use Verifying legal owner on vehicles that the public wants to sell or trade into our dealership.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

SEATTLE AUTO MANAGEMENT, INC.
MERCEDES BENZ OF SEATTLE
2025 AIRPORT WAY S
SEATTLE, WA 98134

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

Unified Business ID #: 603154792

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
MOTOR VEHICLE DEALER #0221 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:

MERCEDES BENZ OF SEATTLE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

Vehicle/Vessel On-line Access Contract Application-CPS

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cps@dol.wa.gov

Print and scan or upgrade to

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Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

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If you currently have a CPS number, enter it here **13a**

Company/Agency name EAN HOLDINGS LLC		Website	
Contact name. Primary applicant and contract manager SUSAN THAYER	(Area code) Telephone number 503-862-5259	Email (required) stthayer@erac.com	
Contact name 2 (if applicable) CHRISTOPHER FRY	(Area code) Telephone number 503-692-8400	Email (required) christopher.m.fry@ehi.com	
Physical address of business (number and street) 8008 NE FOURTH PLAIN STE 370			
City VANCOUVER	State WA	ZIP code 98662	
Mailing address of business (if different) 20400 SW TETON AVE			
City TUALATIN	State OR	ZIP code 97062	
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 602901681
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>SELL AND PURCHASE VEHICLES AS WELL AS PROVIDE RENTAL CARS</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>TO NOTIFY THEM THAT A LIEN WAS PLACED ON THEIR VEHICLE AND WE COULD NOT ACCEPT THE TRADE AT THIS TIME. (BY EMAIL AND PHONE)</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
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 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/10/17

Date and place (county) signed

C HRISTOPHER FRY

PRINT or TYPE Name

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "Information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	EAN HOLDINGS LLC ALYSSE CRICKSHANK		alysse.m.crickshank@deni.com	503-862-5261
	Address, City, State, Zip code 20400 SW Teton Ave, Tualatin OR 97062		Subscriber's permissible use checking records for a ghost lien being put onto a vehicle	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	EAN HOLDINGS LLC SUSAN THAYER		sthayera@eval.com	503-862-5259
	Address, City, State, Zip code 20400 SW Teton Ave, Tualatin OR 97062		Subscriber's permissible use checking records for a ghost lien being put onto a vehicle	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



1890-1

EAN HOLDINGS, LLC
ENTERPRISE RENT A CAR
20400 SW TETON AVE
TUALATIN OR 97062-8812

DETACH BEFORE POSTING



STATE OF
WASHINGTON

Limited Liability Company

EAN HOLDINGS, LLC
ENTERPRISE RENT A CAR
8008 NE FOURTH PLAIN RD STE 370
VANCOUVER, WA 98662-7797

Unified Business ID #: 602907681

Business ID #: 001

Location: 0103

Expires: Feb 28, 2018

UNEMPLOYMENT INSURANCE - ACTIVE
RENTAL CAR REGISTRATION #R61338 - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

CITY ENDORSEMENTS:
VANCOUVER GENERAL BUSINESS - ACTIVE

LICENSING RESTRICTIONS:
Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:
ENTERPRISE RENT A CAR

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 602907681 001 0103

Expires: Feb 28, 2018

EAN HOLDINGS, LLC
ENTERPRISE RENT A CAR
8008 NE FOURTH PLAIN RD STE
370
VANCOUVER, WA 98662-7797

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
RENTAL CAR REGISTRATION
#R61338 - ACTIVE
TAX REGISTRATION - ACTIVE
VANCOUVER GENERAL BUSINESS -
ACTIVE

gal0002

DETACH THIS SECTION FOR YOUR WALLET

Director, Department of Revenue

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the Internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here **13a**

Company/Agency name Title Guaranty Company of Lewis County		Website	
Contact name, Primary applicant and contract manager Meri Hamre	(Area code) Telephone number 360-748-0001	Email (required) meri@titlegco.com	
Contact name 2 (if applicable) Halie Brown	(Area code) Telephone number 360-748-0001	Email (required) halie@titlegco.com	
Physical address of business (number and street) 200 NW Pacific Ave			
City Chehalis	State WA	ZIP code 98532	
Mailing address of business (if different) PO Box 1304			
City Chehalis	State WA	ZIP code 98532	
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) 212 002 790
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We are a title insurance and escrow company, insuring and closing real estate transactions (i.e. sales/purchases, refinances) in Lewis County, Washington.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>We would contact the owner via phone, email or letter. In order to complete a real estate transaction and transfer ownership of mobile home, we must obtain original title and release documents and signatures from legal owners.</p> <p>NO, we do not disclose this information to any third parties that have not been disclosed to be a part of the transaction.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

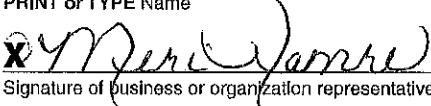
CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1-9-18, Lewis Co.
Date and place (county) signed

Meri Hamre, Manager
PRINT or TYPE Name

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

MASTER LICENSE SERVICE
PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400

REGISTRATIONS AND LICENSES

Domestic Profit Corporation

Unified Business ID #: 212 002 790
Business ID #: 1
Location: 1

TITLE GUARANTY COMPANY OF LEWIS COUNTY
TITLE GUARANTY CO OF LEWIS COUNTY
200 NW PACIFIC AVE
CHEHALIS WA 98532 0290

TAX REGISTRATION
INDUSTRIAL INSURANCE
UNEMPLOYMENT INSURANCE

LICENSING RESTRICTIONS:

Not licensed to hire persons under age 18 at this location.

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for these licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Elizabeth A. Luse

Director, Department of Licensing



STATE OF
WASHINGTON

Office of the Secretary of State
Corporations Division

LEGAL ENTITY REGISTRATION

TITLE GUARANTY COMPANY OF LEWIS COUNTY
200 NW PACIFIC AVE
CHEHALIS, WA 98532

Unified Business ID #: 212002790

Expiration: Feb-28-2018

Domestic Profit Corporation

Renewed by Authority of Secretary of State

By accepting this document the recipient certifies that information provided on the annual report was complete, true, and accurate to the best of his or her knowledge, and that the company will stay in compliance with all applicable Washington State regulations.

Secretary of State

Vehicle/Vessel On-line Access Contract Application-IVIPS

Use this form to apply for access to the Internet Vehicle/Vessel Information Processing System (IVIPS). Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

ivips@dol.wa.gov

Print and scan or upgrade to
Adobe Reader XI or above)

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Phone

(360) 359-4001

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information or contact owners as permitted by law. There is no guarantee your request will be approved. See authorities at the bottom of page 2 of this application.

If you currently have an IVIPS number, enter it here **13a**

Company/Agency name BSH INC DBA BOAT COUNTRY		Website WWW.BOATCOUNTRY.COM	
Contact name. Primary applicant and contract manager SHANNON HAWLEY	(Area code) Telephone number (425) 259-6126	Email (required) shannon@boatcountry.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1871 ROSS AVE #A			
City EVERETT		State WA	ZIP code 98201
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) 601736271
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). SALES OF NEW, USED & CONSIGNMENT BOATS & TRAILERS. VEHICLE AND VESSEL RECORDS WILL BE USED TO PROVE OWNERSHIP OF REG & LEGAL OWNER FOR SALE OF BOATS AND TRAILER. ALSO USED TO SEE IF LEGAL HAS RELEASED THEIR INTEREST AFTER WE HAVE MADE PAYOFF WHEN WE ARE WAITING FOR TITLES.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. WE WILL NOT DISCLOSE OR CONTACT OWNER.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners — RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the state seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. A sample notification letter is at the DOL website: <https://fortress.wa.gov/dol/ivipsprod/ContractForms.aspx>.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties — RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

IVIPS record fees: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

09/28/2016

Date and place (county) signed

SHANNON HAWLEY

PRINT or TYPE Name

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for IVIPS must complete and return this section)

Each data broker or reseller must:

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or IVIPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the "Subscriber's permissible use" box, provide a specific description of why the subscriber needs access to personal information. For example, "Information is used in the processing of insurance claims investigations." A vague answer, such as, "Check who owns the vehicle," is unacceptable.

1 Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		
2 Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		
3 Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		
4 Legal business name		
Address, City, State, ZIP code		
Contact name	(Area code) Telephone number	Email
Providing information Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No		
Subscriber's permissible use		

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

B.S.H. INC.
BOAT COUNTRY
1871 ROSS AVE
EVERETT, WA 98205

Unified Business ID #: 601736271

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

UNEMPLOYMENT INSURANCE - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE

TAX REGISTRATION - ACTIVE

VESSEL DEALER #8669 - ACTIVE

MISCELLANEOUS VEHICLE DEALER #6467 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:

BOAT COUNTRY

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue



STATE OF
WASHINGTON

Office of the Secretary of State
Corporations Division

LEGAL ENTITY REGISTRATION

B.S.H. INC.
1871 ROSS AVE STE A
EVERETT, WA 98201-8668

Unified Business ID #: 601736271

Expiration: Oct-31-2018

Domestic Profit Corporation

Renewed by Authority of Secretary of State

By accepting this document the recipient certifies that information provided on the annual report was complete, true, and accurate to the best of his or her knowledge, and that the company will stay in compliance with all applicable Washington State regulations.

A handwritten signature in cursive script, appearing to read "Kim Wynn", written over a horizontal line.

Secretary of State

**Vehicle/Vessel On-line Access
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)**cps@dol.wa.gov**

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here **13a** _____

Company/Agency name JACK CARROLL'S SKAGIT HYUNDAI		Website	
Contact name. Primary applicant and contract manager PAM LOMSDALEN	(Area code) Telephone number 360-757-7057	Email (required) pam@skagithyundai.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1313 GOLDENROD RD			
City BURLINGTON		State WA	ZIP code 98233
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 602562604

Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

NEW/USED AUTO DEALERSHIP. WE USE IVIPS TO VERIFY LEGAL AND REGISTERED OWNERS ON USED VEHICLES BEING TRADED IN TO OUR DEALERSHIP.

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

WE HAVE NO NEED TO DISCLOSE INFORMATION TO ANYONE OUTSIDE OF OUR COMPANY.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

PAM LOMSDALEN

PRINT or TYPE Name

X

Signature of business or organization representative

01/05/2018 SKAGIT

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

JACK CARROLL'S LINCOLN MERCURY, INC.
JACK CARROLL'S SKAGIT HYUNDAI
1313 GOLDENROD RD
BURLINGTON, WA 98233-3445

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

Unified Business ID #: 602562604

Business ID #: 001

Location: 0002

Expires: Dec 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
MOTOR VEHICLE DEALER #7800 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:

JACK CARROLL'S SKAGIT HYUNDAI

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name Harborstone Credit Union		Website https://www.harborstone.com	
Contact name. Primary applicant and contract manager Beverly Lizama	(Area code) Telephone number (253) 983-7026	Email (required) beverly.lizama@harborstone.com	
Contact name 2 (if applicable) Ruth Brooks	(Area code) Telephone number (253) 988-9683	Email (required) ruth.brooks@harborstone.com	
Physical address of business (number and street) 9611 Gravelly Lake Dr. SW			
City Tacoma		State WA	ZIP code 98499
Mailing address of business (if different) PO Box 4207			
City Tacoma		State WA	ZIP code 98438
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 601153426
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Our primary business activity is the financing of vehicles/vessels. We will use the records pulled to verify the lien holder and registered owners for loans being issued when no title or registration is provided. Also to check for any title branding.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>We will only contact the registered owner by phone or mail. We will not provide the information to any other persons or business.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Tacoma WA 1/3/2018
Date and place (county) signed

Beverly Lizama
PRINT or TYPE Name
☒ Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

MASTER LICENSE SERVICE

PO Box 9034 • Olympia, WA 98507-9034 • (360) 664-1400

REGISTRATIONS AND LICENSES

Unified Business ID #: 601 153 926
Business ID #: 1
Location: 1

HARBORSTONE CREDIT UNION
9611 GRAVELLY LAKE DR SW
LAKEWOOD WA 98499

INDUSTRIAL INSURANCE

UNEMPLOYMENT INSURANCE

LICENSING RESTRICTIONS:

Not licensed to hire persons under age 18 at this location.

The licensee named above has been issued the business registrations or licenses listed. By accepting this document the licensee certifies the information provided on the application for these licenses was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Elizabeth A. Luse

Director, Department of Licensing

FAX

TO:	Vehicle Records Disclosure Unit	FROM:	Clyde D Dawkins Auto Recycling
FAX:	360-570-7895	FAX:	None
PHONE:	360-359-4001	PHONE:	503-879-5676
SUBJECT:	Dawkins Renewal	DATE:	January 2, 2018

COMMENTS:

Attached is our contract Application renewal. We finally received our current Dismantler Certificate. If we need anything else for our renewal please notify us.

Sherry Dawkins
Clyde D Dawkins Auto Recycling
503-879-5676

Vehicle/Vessel On-line Access Contract Application-CPS

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name Clyde Dawkins Auto Recycling		Website	
Contact name, Primary applicant and contract manager Clyde Dawkins	(Area code) Telephone number 503-879-5676	Email (required) SDawkins@Centurylink.net	
Contact name 2 (if applicable) Sherry Dawkins	(Area code) Telephone number 503-879-5676	Email (required) SDawkins@Centurylink.net	
Physical address of business (number and street) 49250 SW Helbo Rd			
City Grand Ronde		State OR	ZIP code 97347
Mailing address of business (if different) Same			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Dismantle Junk Cars & take to scrap yard for recycling			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We will mail registered owner notice that we have vehicle, that was abandon on private property. We are required to notify owner. We will not provide information to anyone.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private Investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1-2-17 Yamhill County, OR
Date and place (county) signed

Clyde D Dawkins
PRINT or TYPE Name

x Clyde D. Dawkins
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "Information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

DISMANTLER CERTIFICATE

WR3016

EFFECTIVE: JANUARY 1, 2018

EXPIRES: DECEMBER 31, 2020

Issued To:

CLYDE D DAWKINS

DBA: CLYDE D. DAWKINS AUTO RECYCLING

49250 SW HEBO RD

GRAND RONDE OR 97347

This business is authorized to engage in buying, selling, or dealing in vehicles for the purpose of dismantling in the state of Oregon under the provisions of ORS 822.110, and to exercise privileges granted by certificate under the provisions of ORS 822.125.

To be valid, this certificate must be prominently posted at the business address listed above and is not valid at any other location. It is not valid if expired, revoked, canceled or suspended, under the provisions of ORS 822.045 and ORS 822.050.

*Driver and Motor Vehicle Services
Department of Transportation
Salem, OR 97314*

*** ALTERATION, MUTILATION OR ERASURE WILL VOID CERTIFICATE ***

Vehicle/Vessel On-line Access Contract Application-CPS

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cps@dol.wa.gov

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Adobe Reader XI or above to fill it in and save it.

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Vehicle Records Disclosure Unit

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Fax

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name <i>Lower Columbia Longshoremen's FCU</i>		Website	
Contact name, Primary applicant and contract manager <i>June Brewer</i>	(Area code) Telephone number <i>360-423-2770</i>	Email (required) <i>jbrewer@lclfcu.org</i>	
Contact name 2 (if applicable) <i>Robin Carns</i>	(Area code) Telephone number <i>360-423-2770</i>	Email (required) <i>rcarns@lclfcu.org</i>	
Physical address of business (number and street) <i>629 14th Ave</i>			
City <i>Longview</i>		State <i>WA</i>	ZIP code <i>98032</i>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <div style="background-color: black; color: white; text-align: center; padding: 5px; font-size: 24pt;">6d</div>	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <div style="font-family: cursive; color: blue; padding: 10px;"> <i>Verifying title transfers to secure the credit unions interest or release of interest in collateral securing a loan</i> </div>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <div style="font-family: cursive; color: blue; padding: 10px;"> <i>We may provide the registration record to our attorney if needed due to collection of the debt secured by the vehicle in cases of default.</i> </div>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
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- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12/12/17 Cowlitz County
Date and place (county) signed

Julie A Brewer
PRINT or TYPE Name

X Julie A Brewer, CEO
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

[Help](#)**My DOR** **My DOR Business License Lookup LOWER COLUMBIA LONGSHOREMEN FED CREDIT UNION****License Information:**[New search](#) [Previous search](#)

Entity name: LOWER COLUMBIA LONGSHOREMEN FED CREDIT UNION
Business name: LOWER COLUMBIA LONGSHOREMEN FED CREDIT UNION
Entity type: Corporation
UBI: 601-134-022 **Business ID:** 001 **Location ID:** 0001
Location: Open
Status: To check the status of this company, go to the link(s) below:
Department of Revenue. This entity is not registered with Washington Secretary of State.
Secretary of State

Location and Mailing address:

1405 CYPRESS ST
LONGVIEW, WA, 98632

Information current as of 12/12/2017 1:10:40 PM

[Contact us](#)[Your Privacy](#)

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If you currently have a CPS number, enter it here

13a

Company/Agency name LIII, Inc dba Consumer Auto Liquidators		Website www.calcars.com	
Contact name. Primary applicant and contract manager Sara Calloway	(Area code) Telephone number 509-244-2277	Email (required) scalloway@calcas.com	
Contact name 2 (if applicable) Teri Rohweder	(Area code) Telephone number 509-244-2277	Email (required) teri@calcars.com	
Physical address of business (number and street) 10828 W Sunset Hwy			
City Airway Heights		State WA	ZIP code 99001
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Used Automotive Sales, Retail and Wholesale. CPS is used to verify ownership of vehicles, leinholder, and title status of vehicles/vessels when traded in during a retail sale or purchase.			
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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Sara Calloway, Controller

PRINT or TYPE Name

12-8-17 Spokane County, WA

Date and place (county) signed

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
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- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

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In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name LIII, Inc.	Contact name Sara Calloway	Email scalloway@calcars.com	(Area code) Phone number 509-244-2277
	Address, City, State, Zip code 10828 W Sunset Hwy, Airway Heights, WA 99001		Subscriber's permissible use Vehicle/Vessel search to confirm ownership, leinholder and title status of vehicles/vessels traded in during a retail sale or purchase.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name LIII, Inc.	Contact name Teri Rohweder	Email teri@calcars.com	(Area code) Phone number 509-244-2277
	Address, City, State, Zip code 10828 W Sunset Hwy, Airway Heights, WA 99001		Subscriber's permissible use Vehicle/Vessel search to confirm ownership, leinholder and title status of vehicles/vesels traded in during a retail sale or purchase.	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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**Vehicle/Vessel On-line Access
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.

Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name <i>Bruce Titus Ford, Inc. dba Bruce Titus Port Orchard Ford</i>		Website	
Contact name, Primary applicant and contract manager <i>Colleen Sandoval</i>	(Area code) Telephone number <i>(206) 830-3285</i>	Email (required) <i>colleens@brucetitus.com</i>	
Contact name 2 (if applicable) <i>Melinda Nelson</i>	(Area code) Telephone number <i>(206) 876-3000</i>	Email (required) <i>melinda.nelson@brucetitus.com</i>	
Physical address of business (number and street) <i>1215 Bay St</i>			
City <i>Port Orchard</i>		State <i>WA</i>	ZIP code <i>98366</i>
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) <i>602960439</i>
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <i>Automotive sales + purchasing.</i></p> <p><i>Use to verify registered and legal owners on vehicles.</i></p> <p><i>Verify title status</i></p> <p><i>Verify vehicle information</i></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>Yes to owner if additional documents are required.</i></p> <p><i>Phone or email</i></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12/7/17
Date and place (county) signed

Colleen Sandoval
PRINT or TYPE Name
X *Colleen Sandoval*
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name <i>Bruce Titus Ford, Inc</i>	Contact name <i>Colleen Scandola</i>	Email <i>colleen@brucetitus.com</i>	(Area code) Phone number <i>(203) 830-3725</i>
	Address, City, State, Zip code <i>1215 Bay St, Port Orchard, WA 98366</i>		Subscriber's permissible use <i>Verify registered + legal owners to collect needed documents for trade ins and purchases and refunds.</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name <i>Bruce Titus Ford, Inc</i>	Contact name <i>Melinda Nelson</i>	Email <i>melinda.nelson@brucetitus.com</i>	(Area code) Phone number <i>(206) 876-3000</i>
	Address, City, State, Zip code <i>1215 Bay St, Port Orchard, WA 98366</i>		Subscriber's permissible use <i>Verify registered and legal owners to collect needed documents for trade ins, purchases and refunds.</i>	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

Vehicle/Vessel Contract Application

Use this form to apply for access to vehicle/vessel records. Send the complete form with a copy of your business license and other required documents by fax to: **(360) 570-7895** or email (print and scan or upgrade to **Adobe Reader XI** or above) to: **vsdisclose@dol.wa.gov**.

Please allow 14 business days to process and respond to your request.

We are committed to protecting personal information and there is no guarantee you will be approved. We release records only as allowed by state and federal laws, including the Driver Privacy Protection Act (DPPA). The DPPA also restricts redisclosure of personal information you receive.

Fees

IVIPS contract fees: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee.

Bulk records contract fees: There is a 1-cent fee per record. The contractor is also responsible to pay a onetime set-up fee and monthly maintenance fee. Setup and maintenance fees may vary for bulk records.

1 Method of access you are requesting			
<input checked="" type="checkbox"/> IVIPS (Individual record inquiries) – (360) 359-4001 Current IVIPS number, if applicable: 13a			
<input type="checkbox"/> Bulk vehicle/vessel records (Batch process) – (360) 902-3673			
PRINT or TYPE Company/Agency name Progressive Casualty Insurance Company			
Primary contact name Zechariah W, Davis IV	(Area code) Telephone number (503) 495-4534	(Area code) Fax number (503) 495-4637	
Email zach_davis@progressive.com	Website		
Secondary contact name Ross Ashdown	(Area code) Telephone number (503) 495-4552	Email ross_ashdown@progressive.co	
Contract manager name zechariah W, Davis IV	(Area code) Telephone number (503) 495-4534	Email zach_davis@progressive.com	
Physical address of business (Number and street, City, State, ZIP code) 7150 SW Sandburg St, Tigard OR 97223			
Mailing address of business, if different (Address or PO Box, City, State, ZIP code) same as above			
Provide one of these identifiers:	Tax Identification Number (TIN) 6d	Federal Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
2 Provide a detailed explanation of your primary business activity (exactly what your business does). PROGRESSIVE CASUALTY INS. CO. AND ITS AFFILIATES WITHIN THE PROGRESSIVE GROUP OF INS. CO. WILL USE VEHICLE AND VESSEL LICENSE, REGISTRATION, AND TITLE INFO AND DOCUMENTATION TO VERIFY VEHICLE AND VESSEL LICENSE AND TITLE RECORDS IN CONNECTION WITH CLAIMS INVESTIGATIONS AND ANTI-FRAUD ACTIVITIES AS PERMITTED BY WRS 46.12.340, WA ADMIN CODE 208-93-067, WABX ORDER 97-01, AND THE PROFORM DRIVER, REGISTERED ACT 14 USE 2721 ET SEQ.			
3 Check all that apply to you and/or your business			
<input type="checkbox"/> Attorney <input type="checkbox"/> Auction <input type="checkbox"/> Auto manufacturer or agent <input type="checkbox"/> Bail bonds <input type="checkbox"/> Bank or financing firm <input type="checkbox"/> Business <input type="checkbox"/> Commercial parking company <input type="checkbox"/> Credit union <input type="checkbox"/> Data broker/Reseller <input type="checkbox"/> Debt recovery/Collection <input type="checkbox"/> Employer/Prospective employer <input type="checkbox"/> Government <input type="checkbox"/> Guardianship/Trustee service <input type="checkbox"/> Homeowner association <input type="checkbox"/> Hospital <input type="checkbox"/> Hulk hauler <input checked="" type="checkbox"/> Insurance company/agent	<input type="checkbox"/> Lien service <input type="checkbox"/> Marina <input type="checkbox"/> Neighborhood block watch <input type="checkbox"/> Newspaper or media <input type="checkbox"/> Non-profit organization <input type="checkbox"/> Parking enforcement <input type="checkbox"/> Private investigator <input type="checkbox"/> Process server <input type="checkbox"/> Property mgmt. - Government <input type="checkbox"/> Property mgmt. - Private <input type="checkbox"/> Repossession service <input type="checkbox"/> Retail/Store <input type="checkbox"/> School - Private <input type="checkbox"/> School - Public <input type="checkbox"/> Scrap processor or wrecker <input type="checkbox"/> Security services - Government <input type="checkbox"/> Security services - Private	<input type="checkbox"/> Service bureau for another business Provide business name: _____ <input type="checkbox"/> Storage facility <input type="checkbox"/> Title/Escrow <input type="checkbox"/> Toll facility <input type="checkbox"/> Towing company <input type="checkbox"/> Transporter <input type="checkbox"/> Union (non-profit) <input type="checkbox"/> Vehicle/Vessel dealer <input type="checkbox"/> I represent a business that will provide information to another party Provide business names: _____ <input type="checkbox"/> Other (explain) _____ _____	

4 Explain in detail why you need vehicle/vessel information. Give examples. Attach additional pages if necessary.

Progressive Casualty Insurance company and its corporate affiliates write and service insurance policies covering vehicles and vessels.

5 Redisclosure and/or selling of information

Will you sell or provide the information to anyone else? ☐ Sell ☒ Provide ☐ No

If no, skip to Section 6.

If yes, who will you provide or sell the information?

The information will be used only for the benefits of corporate affiliates of Progressive Casualty Insurance company with the Progressive Group of insurance companies and will be disclosed to such affiliates only as necessary, usual or customary for the purpose described in Section 2 or as otherwise may be legally required.

The release and redisclosure of personal information is restricted by state and federal laws. How do you ensure recipients are entitled to personal information under these laws?

The third parties to which the information may be disclosed are corporate affiliates of Progressive Casualty Insurance Company with the group of Progressive group of insurance companies that will use the information only as described under section 2 and have the same permitted use(s) for such information as Progressive Casualty Insurance Company.

How will you provide the information to recipients? Explain.

The information may be supplied electronically, orally or in the hard copy to Progressive Casualty Insurance companies & corporate affiliates.

6 Owner contact

Will you contact the vehicle/vessel owner? ☒ Yes ☐ No
Unsolicited business contact for commercial purposes is strictly prohibited.

If yes, why will you contact the owner and how will you contact them?

We will cotact owners for the purpose of investigating insurance claims.

We may contact owners via telephone, mail, e-mail, text messaging, or in person.

7 Answer the following

1. Do you agree not to sell or provide the information to any third party that has not been disclosed as part of this application? ☒ Yes ☐ No
2. Do you agree not to use the information for any purpose other than reasons stated on this application? ☒ Yes ☐ No
3. Do you agree not to use, or facilitate the use of, the information for commercial purpose, making unsolicited business contact, or promoting the sale of any goods or services? ☒ Yes ☐ No

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

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Submit the following documentation with your application:

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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12-7-17
Date and place (county) signed

Zechariah Davis
PRINT or TYPE Name

X Zechariah Davis
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name Qualstar Credit Union		Website www.qualstarcu.com	
Contact name. Primary applicant and contract manager Deana Carver	(Area code) Telephone number 425-460-3858	Email (required) deanac@qualstarcu.com	
Contact name 2 (if applicable) Roshalle DeArment	(Area code) Telephone number 425-460-3847	Email (required) Roshalle@qualstarcu.com	
Physical address of business (number and street) 2133 152nd Ave NE			
City Redmond		State WA	ZIP code 98052
Mailing address of business (if different) PO Box 96730			
City Bellvue		State WA	ZIP code 98009
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Credit Union offering vehicle loans, both refinance and purchases. We will use the search to verify registered and legal owners and branded titles</p> <p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>the owner will already be aware of the verification as they have applied for the loan and provided the VIN number</p>			

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By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12/7/17 King County
Date and place (county) signed

Deana Carver
PRINT or TYPE Name
☒ Deana Carver
Signature of business or organization representative

Authorities:

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Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



[Help](#)

My DOR

[My DOR](#) [Business License Lookup](#) [QUALSTAR CREDIT UNION](#)

License Information:

[New search](#) [Previous search](#)

Entity name: QUALSTAR CREDIT UNION
Business name: QUALSTAR CREDIT UNION
Entity type: Nonprofit Corporation
UBI: 601-767-208 **Business ID:** 001 **Location ID:** 0001
Location: Open
Status: To check the status of this company, go to the link(s) below:
Department of Revenue
Secretary of State

Location address:
2121 152ND AVE NE
REDMOND, WA, 98052

Mailing address:
PO BOX 96730
BELLEVUE, WA, 98009

Governing People May include governing people not registered with SOS

Governing people	Title
LATAWIEC, FRANK	Chairman of the Board
RELIC, JOHN C	President
STREULI, EDWARD	

3 Rows

Information current as of 12/7/2017 9:22:37 AM

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[Your Privacy](#)
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Vehicle/Vessel On-line Access Contract Application-CPS

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Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

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If you currently have a CPS number, enter it here

13a

Company/Agency name J & R AUTO SPORTS LLC		Website jandrautosports.com	
Contact name. Primary applicant and contract manager JARED I. DRAYTON	(Area code) Telephone number 425-350-0132	Email (required) jandrautosports@hotmail.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 7428 EVERGREEN WAY			
City EVERETT		State WA	ZIP code 98203
Mailing address of business (if different) 5023 130TH PL NE			
City MARYSVILLE		State WA	ZIP code 98271
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 603054787

Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

USED VEHICLE SALES RETAIL AND WHOLESALE. VEHICLE RECORDS WILL BE ACCESSED TO VERIFY LEGAL OWNERSHIP AND TITLE STATUS PRIOR TO PURCHASE FOR RESALE.

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

NO. RECORDS SEARCH FOR INTERNAL BUSINESS USE ONLY.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact **cps@dol.wa.gov** to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12/6/17 SNOHOMISH COUNTY
Date and place (county) signed

JJR AUTOSPORTS LLC
PRINT or TYPE Name

X

Signature of business or organization representative

JARED DRAYTON, OWNER, JJR AUTOSPORTS

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)

Each data broker or reseller must:

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

DETACH BEFORE POSTING



STATE OF
WASHINGTON

Limited Liability Company

J&R AUTO SPORTS LLC
7428 EVERGREEN WAY
EVERETT, WA 98203-5664

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

BUSINESS LICENSE

Unified Business ID #: 603054787

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
MOTOR VEHICLE DEALER #7479 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

A handwritten signature in cursive script that reads "Vicki Smith".

Director, Department of Revenue

**Vehicle/Vessel On-line Access
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.

Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name Northwest Investigative Services, Inc		Website nwisi.com	
Contact name. Primary applicant and contract manager Sandra Briggs	(Area code) Telephone number 253-631-4144 x303	Email (required) sandy@nwisi.com	
Contact name 2 (if applicable) Michael Briggs	(Area code) Telephone number 253-631-4144 x301	Email (required) mike@nwisi.com	
Physical address of business (number and street) 6403 South Island Drive E			
City Bonney Lake		State WA	ZIP code 98391
Mailing address of business (if different) P O Box 8273			
City Bonney Lake		State WA	ZIP code 98391
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) 602-000-642

Answer the following

Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).

Research and locating individuals and businesses involved in litigation or in preparation of litigation; Accident investigation; HOA situation research

Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.

No, we do not contact owners for any purpose. Our clients (insurance companies, law offices, HOA's) may be provided some information gained from VIPS returns as needed always within Federal DPPA Laws.

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

November 30, 2017 (Pierce County)

Date and place (county) signed

Sandra J. Briggs

PRINT or TYPE Name

X *Sandra J. Briggs*

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)

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- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
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	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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State of Washington
DEPARTMENT OF LICENSING
INVESTIGATOR PROGRAM
P O Box 9649
Olympia, WA 98507

ADDRESS SERVICE REQUESTED

PPU 691

NORTHWEST INVEST SERVICES INC
MICHAEL R BRIGGS
PO BOX 7098
COVINGTON WA 98042

STATE OF WASHINGTON

UNARMED PRIVATE INVESTIGATOR
PRINCIPAL

NORTHWEST INVEST SERVICES INC
MICHAEL R BRIGGS
160 DESERT SHORES DR
ORONDO WA 98843

1655 12/31/2017
License Number Expiration Date

Pat Kohler
Pat Kohler, Director

STATE OF WASHINGTON
DEPARTMENT OF LICENSING - BUSINESS AND PROFESSIONS DIVISION

THIS CERTIFIES THAT THE PERSON OR BUSINESS NAMED BELOW IS AUTHORIZED AS A

UNARMED PRIVATE INVESTIGATOR
PRINCIPAL

NORTHWEST INVEST SERVICES INC
MICHAEL R BRIGGS
160 DESERT SHORES DR
ORONDO WA 98843

Licensee Released

Termination Date / /

1655

09/04/1992

12/31/2017

License Number

Issued Date

Expiration Date

Pat Kohler
Pat Kohler, Director



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

NORTHWEST INVESTIGATIVE SERVICES, INC.
27451 209TH CT SE
MAPLE VALLEY, WA 98038-3283

Unified Business ID #: 601000642

Business ID #: 001

Location: 0001

Expires: Dec 31, 2017

PRIVATE INVESTIGATIVE AGENCY #303 - ACTIVE
INDUSTRIAL INSURANCE - ACTIVE

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

PRIVATE INVESTIGATIVE AGENCY PRINCIPAL: BRIGGS, MICHAEL R

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Victor Smith
Director, Department of Revenue

IBI: 601000642 001 0001

NORTHWEST INVESTIGATIVE
SERVICES, INC.
27451 209TH CT SE
MAPLE VALLEY, WA 98038-3283

STATE OF WASHINGTON

PRIVATE INVESTIGATIVE AGENCY
#303 - ACTIVE
UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

Expires: Dec 31, 2017

**Vehicle/Vessel On-line Access
Contract Application-CPS**

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)**cps@dol.wa.gov**

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.**Mail**

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name Curtis, Casteel and Palmer Law Group, PLLC		Website www.curtislaw-llc.com	
Contact name. Primary applicant and contract manager Stacy Bradshaw	(Area code) Telephone number 425-409-2745	Email (required) sbradshaw@curtislaw-llc.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 3400 188th St SW, Ste 565			
City Lynnwood		State WA	ZIP code 98037
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 603-419-740
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Closing escrow. We need to obtain title information for transferring mobile home titles from sellers to buyers. We also assist in the process of title eliminations.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We do contact the owner to assist in title transfers. We do not share this information with private investigators or any other persons of entities that are not listed on the IVIPs report.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
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- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

11/27/17, Snohomish County

Date and place (county) signed

Stacy Bradshaw

PRINT or TYPE Name

X

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
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Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

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- Record all subscribers
- Document the specific permissible use qualification for each subscriber
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In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name Curtis, Casteel & Palmer Law	Contact name	Email sbradshaw@curtislaw-llc.com	(Area code) Phone number 425-409-2745
	Address, City, State, Zip code 3400 188th St SW, Ste 565, Lynnwood, WA 98037		Subscriber's permissible use Information is used to assist in transferring title and assisting with title eliminations	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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STATE OF
WASHINGTON

BUSINESS LICENSE

Domestic Professional Limited Liability Company

Unified Business ID #: 603 419 740
Business ID #: 1
Location: 1

CURTIS & CASTEEL LAW GROUP, PLLC
3400 188TH ST SW STE 565
LYNNWOOD WA 98037 4773

TAX REGISTRATION
INDUSTRIAL INSURANCE
UNEMPLOYMENT INSURANCE

LICENSING RESTRICTIONS:

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Vikki Smith
Director, Department of Revenue

STATE OF WASHINGTON

EXPIRATION DATE

10 1 1

TEEL LAW GROUP, PLLC
T SW STE 565
98037 4773

TION
NSURANCE
INSURANCE

Smith
Department of Revenue

SECTION FOR YOUR WALLET

**Vehicle/Vessel On-line Access
Contract Application-CPS**

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Olympia, WA 98507**Fax**

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If you currently have a CPS number, enter it here _____

Company/Agency name Jonathan Smith, P.S. dba Advantage Legal Group		Website www.advantagelegalgroup.com	
Contact name. Primary applicant and contract manager Jonathan Smith	(Area code) Telephone number 425-452-9797	Email (required) jonathan@advantagelegalgroup.com	
Contact name 2 (if applicable) Don Knox	(Area code) Telephone number 425-452-9797	Email (required) don@advantagelegalgroup.com	
Physical address of business (number and street) 12207 NE 8th Street			
City Bellevue		State WA	ZIP code 98005
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Personal injury attorney. Used to track down defendant's address and identity from license plate number.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. Used to identify owners of vehicles. May include service of process by this law firm or contact for witness statements.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Jonathan Smith

PRINT or TYPE Name

11/14/17, KING COUNTY, WA

Date and place (county) signed

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)
cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here 13a

Company/Agency name Northwest Honda		Website www.northwesthonda.com	
Contact name, Primary applicant and contract manager Sue Metcalf	(Area code) Telephone number (360) 676-2277	Email (required) Sue@northwesthonda.com	
Contact name 2 (if applicable) Kelly Tiffany	(Area code) Telephone number (360) 676-2277	Email (required) kelly@northwesthonda.com	
Physical address of business (number and street) 2010 Iowa St			
City Bellingham		State WA	ZIP code 98229
Mailing address of business (if different) Same			
City		State	ZIP code
Provide one of these identifiers		Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN) WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We buy and sell new and used cars. We will search to confirm registered owner + lienholder information.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The only circumstance when we would share information is when wholesale selling a car with only an affidavit and not a physical title.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Sue Metcalf

PRINT or TYPE Name

12/11/17 Bellingham, WA

Date and place (county) signed

X Sue Metcalf

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

NWH, INC.
NORTHWEST HONDA
2010 IOWA ST
BELLINGHAM, WA 98229-4726

UNEMPLOYMENT INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
MOTOR VEHICLE DEALER #2313 - ACTIVE

Unified Business ID #: 601826456

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

CITY ENDORSEMENTS:

BELLINGHAM GENERAL BUSINESS #022535 - ACTIVE

DUTIES OF MINORS:

WASH CARS, CLEAN LOT

LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

The regular driving of motor vehicles by minors is prohibited. WAC 296-125-030(2)

REGISTERED TRADE NAMES:

NWH, INC. DBA NORTHWEST HONDA
NWH, INC. DBA NORTHWEST HONDA

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

UBI: 601826456 001 0001

STATE OF WASHINGTON

Expires: Oct 31, 2018

NWH, INC.
NORTHWEST HONDA
2010 IOWA ST
BELLINGHAM, WA 98229-4726

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
TAX REGISTRATION - ACTIVE
MOTOR VEHICLE DEALER #2313 -
ACTIVE
BELLINGHAM GENERAL BUSINESS
#022535 - ACTIVE

Director, Department of Revenue

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here _____

13a

Company/Agency name ESPY INVESTIGATIONS		Website www.Espyinvestigations.com	
Contact name. Primary applicant and contract manager RUBY DALY	(Area code) Telephone number (425) 785-4030	Email (required) RUBY@ESPYINVESTIGATIONS.CC	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 227 BELLEVUE WAY NE PMB 265			
City BELLEVUE		State WA	ZIP code 98004
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 603 174 588
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>I conduct research and verification information primarily for the purpose of working with attorneys in preparation for court cases that are going to trial. Process service, background information, locating correct address information and verification for owned vehicles to aid in my investigation.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. I will use this information to aid in my investigation to assist in proper address verification to submit documents. I would not have any purpose of contacting the registered owner and disclosing this information. I would utilize this information to assist in verification of ownership of vehicle and or address verification.</p>			

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
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Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

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(360) 570-7895

Do not use this form for personal or individual record requests.
Use the **Vehicle or Boat Record Request** forms located at dol.wa.gov/forms/formspd.html

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If you currently have a CPS number, enter it here _____

13a

Company/Agency name <i>Chae Inc dba: Acura of Seattle</i>		Website <i>www.acuraofseattle.com</i>	
Contact name. Primary applicant and contract manager <i>Julie A. Sato</i>	(Area code) Telephone number <i>(206) 433-1000</i>	Email (required) <i>jsato@acuraofseattle.com</i>	
Contact name 2 (if applicable) <i>Kevin Burton</i>	(Area code) Telephone number <i>(206) 433-1000</i>	Email (required) <i>kburton@acuraofseattle.com</i>	
Physical address of business (number and street) <i>301 Baker Blvd</i>			
City <i>Seattle</i>		State <i>WA</i>	ZIP code <i>98188</i>
Mailing address of business (if different) <i>same as above</i>			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) <div style="background-color: black; color: white; text-align: center; padding: 5px;">6d</div>	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). <div style="margin-top: 10px;"> <i>New and used vehicle sales</i> <i>Service and parts sales.</i> <i>* Verify legal owner on trade-ins or used vehicle purchase.</i> </div>			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. <div style="margin-top: 10px;"> <i>We may possibly contact the owner.</i> <i>By phone or email.</i> <i>If applicable we may need to verify any discrepancies on the customers transaction.</i> </div>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners—RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4)(a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- ✓ • **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

02.16.18 King County
Date and place (county) signed

Julie A. Sato
PRINT or TYPE Name
☒ Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

CHAE, INC.
ACURA OF SEATTLE
301 BAKER BLVD
SEATTLE, WA 98188

UNEMPLOYMENT INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
MOTOR VEHICLE DEALER #2490 - ACTIVE

Unified Business ID #: 600609521
Business ID #: 001
Location: 0001
Expires: Jan 31, 2019

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

DUTIES OF MINORS:
FILING PAPERWORK.

LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Service occupations: if a minor works past 8:00 p.m., minor must be supervised by a responsible adult employee who is on the premises at all times. WAC 296-125-030(30)

REGISTERED TRADE NAMES:

ACURA OF SEATTLE
OAG
O'BRIEN AUTO GROUP

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 600609521 001 0001

Expires: Jan 31, 2019

CHAE, INC.
ACURA OF SEATTLE
301 BAKER BLVD
SEATTLE, WA 98188

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
TAX REGISTRATION - ACTIVE
MOTOR VEHICLE DEALER #2490 -
ACTIVE

Vehicle/Vessel On-line Access Contract Application-CPS

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Vehicle Records Disclosure Unit

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PO Box 2957

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If you currently have a CPS number, enter it here _____

Company/Agency name doggett autobrokers		Website	
Contact name. Primary applicant and contract manager william doggett	(Area code) Telephone number 2069303382	Email (required) doggett47@gmail.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 120 s spokane st			
City seattle		State wa	ZIP code 98134
Mailing address of business (if different) 27715 212th pl se			
City maple valley		State wa	ZIP code 98038
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) 604147719
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>we sell cars and take cars in on trade and obtain bank financing for customers and pay off some of the trades and buy cars at auction and some customers like to sell their cars to us</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. I will not contact anyone in regards to the info that i receive its for information to me to decide whether or not i will buy a car from such person in front of me and it will help me determine whether or not if a car has a payoff and and the owner tells me something different standing in front of me. I will not call or discuss this info with anybody ONLY FOR INFORMATION PURPOSE ONLY</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12/24/17 King
Date and place (county) signed

William Doggett Doggett Autobrokers
PRINT or TYPE Name
☒ Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

DETACH BEFORE POSTING



STATE OF
WASHINGTON

Limited Liability Company

BUSINESS LICENSE

KATHERINE 77 AUTOLOANS, LLC
DOGGETT AUTOBROKERS
120 S SPOKANE ST
SEATTLE, WA 98134-2221

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

Unified Business ID #: 604147719
Business ID #: 001
Location: 0001
Expires: Dec 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
MOTOR VEHICLE DEALER #10891 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

REGISTERED TRADE NAMES:

DOGGETT AUTOBROKERS

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

UBI: 604147719 001 0001

KATHERINE 77 AUTOLOANS, LLC
DOGGETT AUTOBROKERS
120 S SPOKANE ST
SEATTLE, WA 98134-2221

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
MOTOR VEHICLE DEALER #10891 -
ACTIVE

STATE OF WASHINGTON

Expires: Dec 31, 2018

Director, Department of Revenue

DETACH THIS SECTION FOR YOUR WALLET

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.

Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name MCCURLEY INTEGRITY HONDA		Website www.billmccurley.com	
Contact name. Primary applicant and contract manager KIMBERLY CARLSON	(Area code) Telephone number (509)374-2644	Email (required) kimberly.carlson@mccurley.net	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1775 FOWLER ST			
City RICHLAND		State WA	ZIP code 99352
Mailing address of business (if different) PO BOX 2698			
City PASCO		State WA	ZIP code 99301
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 602-876-198
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We are a new and used automobile dealership. We use vehicle records to verify legal owners of vehicles and verification of lien holder information on vehicles traded into us.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The owner will be in the office at the time this information is looked up. No other person will be given this information</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Kimberly Carlson

PRINT or TYPE Name

X

Signature of business or organization representative

12/07/2017

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name MCCURLEY INTEGRITY H	Contact name CHAD VAUGHN	Email CHAD.VAUGHN@MCCURL.	(Area code) Phone number
	Address, City, State, Zip code PO BOX 2698 PASCO WA 99301		Subscriber's permissible use VEHICLE SEARCH	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
2	Legal business name MCCURLEY INTEGRITY H	Contact name SCOTT HARVEY	Email SCOTT.HARVEY@MCCURL.	(Area code) Phone number
	Address, City, State, Zip code PO BOX 2698 PASCO WA 99301		Subscriber's permissible use VEHICLE SEARCH	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
3	Legal business name MCCURLEY INTEGRITY H	Contact name JAVIER CASTRO	Email JAVIER.CASTRO@MCCURL.	(Area code) Phone number
	Address, City, State, Zip code PO BOX 2698 PASCO WA 99301		Subscriber's permissible use VEHICLE SEARCH	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.



4710-1

MCCURLEY INTEGRITY AUTO, L.L.C.
MCCURLEY INTEGRITY HONDA
PO BOX 2698
PASCO WA 99302-2698

DETACH BEFORE POSTING



STATE OF
WASHINGTON

BUSINESS LICENSE

Limited Liability Company

MCCURLEY INTEGRITY AUTO, L.L.C.
MCCURLEY INTEGRITY HONDA
1775 FOWLER ST
RICHLAND, WA 99352-4807

UNEMPLOYMENT INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
MOTOR VEHICLE DEALER #0111 - ACTIVE

Unified Business ID #: 602876198
Business ID #: 001
Location: 0001
Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

CITY ENDORSEMENTS:

RICHLAND SERVICE BUSINESS #F06000 - ACTIVE

DUTIES OF MINORS:

WASHING & MOVING VEHICLES, FILING, FAXING, PHOTOCOPYING. *SERVICE OCCUPATIONS: IF A MINOR WORKS PAST 8:00 P.M.: MINOR MUST BE SUPERVISED BY A RESPONSIBLE ADULT EMPLOYEE WHO MUST REMAIN ON PREMISE AT ALL TIMES.*

LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

The regular driving of motor vehicles by minors is prohibited. WAC 296-125-030(2)

REGISTERED TRADE NAMES:

MCCURLEY INTEGRITY HONDA

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

UBI: 602876198 001 0001

MCCURLEY INTEGRITY AUTO,
L.L.C.
MCCURLEY INTEGRITY HONDA
1775 FOWLER ST
RICHLAND, WA 99352-4807

STATE OF WASHINGTON

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
TAX REGISTRATION - ACTIVE
MOTOR VEHICLE DEALER #0111 -
ACTIVE
RICHLAND SERVICE BUSINESS
#F06000 - ACTIVE

Expires: Oct 31, 2018

gaL0002

Director, Department of Revenue

DETACH THIS SECTION FOR YOUR WALLET

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

**Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html**

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here

13a

Company/Agency name <i>OnPoint Community Credit Union</i>		Website <i>www.onpointcu.com</i>	
Contact name, Primary applicant and contract manager <i>Donna Gregus</i>	(Area code) Telephone number <i>503-273-2680</i>	Email (required) <i>donna.gregus@onpointcu.com</i>	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) <i>2701 NW Vaughn St Ste#800</i>			
City <i>Portland</i>		State <i>OR</i>	ZIP code <i>97210</i>
Mailing address of business (if different) <i>P.O. Box 3750</i>			
City <i>Portland</i>		State <i>OR</i>	ZIP code <i>97208</i>
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <i>6d</i>	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p><i>We are a Financial Lender. We need access to vehicle records for current owner and/or Lien Holder information.</i></p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p><i>If we need documents signed by the owner of record, we will need to complete the form(s) and mail to the owner(s)</i></p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

2-16-18 Portland, OR
Date and place (county) signed

Donna Gregus ONPOINT COMMUNITY CREDIT UNION
PRINT or TYPE Name
X Donna Gregus ONPOINT COMMUNITY CREDIT UNION
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



DEPARTMENT OF CONSUMER AND BUSINESS SERVICES
DIVISION OF FINANCE AND CORPORATE SECURITIES

CERTIFICATE OF APPROVAL

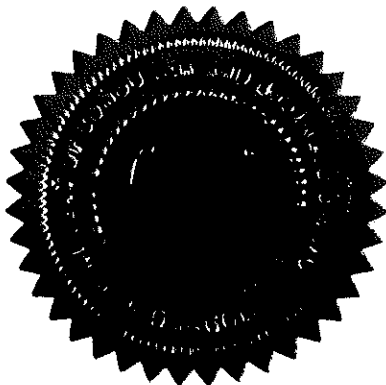
PORTLAND TEACHERS CREDIT UNION filed amendments to the Organization Certificate and to the Bylaws.

The amended Organization Certificate and Bylaws were approved on November 7, 2005.

Now, THEREFORE, I authorize

ONPOINT COMMUNITY CREDIT UNION

to transact business as a community credit union within this State in accordance with its Bylaws and the laws of the State of Oregon, starting on January 1, 2006.



IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed hereto the Seal of the Department of Consumer and Business Services of the State of Oregon at Salem, Oregon, this 7TH day of November 2005.


David Tatman, Acting Administrator

Vehicle/Vessel On-line Access Contract Application-CPS

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PO Box 2957

Olympia, WA 98507

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If you currently have a CPS number, enter it here

13a

Company/Agency name Cowlitz County Title Company		Website www.cowlitztitle.com	
Contact name. Primary applicant and contract manager Bianca Lemmons	(Area code) Telephone number 360-423-5330	Email (required) bianca@cowlitztitle.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1159 14th Avenue			
City Longview		State Washington	ZIP code 98632
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We handle real estate transactions in which we act as a title transfer and escrow closing agent for the sale of mobile homes, along with personal property, therefore we utilize this system to verify ownership/lienholder, etc. to accommodate real estate closings for seller's, buyer's and lender's.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>The information is confidential and will not be disclosed. There are times when we must contact the registered owner or lien holder in order to accommodate the sale or title clearing of the particular mobile home in which we've been asked to handle a sale or refinance closing on, but no information is provided to any outside party.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
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 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Bianca Lemmons, Vice President/Manager

PRINT or TYPE Name

X 

Signature of business or organization representative

2/14/2018

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON
Corporation

BUSINESS LICENSE

Unified Business ID #: 600464147
Business ID #: 001
Location: 0001
Expires: Nov 30, 2018

COWLITZ COUNTY TITLE CO.
COWLITZ COUNTY TITLE CO
1159 14TH AVE
LONGVIEW, WA 98632

UNEMPLOYMENT INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

INDUSTRIAL INSURANCE - ACTIVE

CITY ENDORSEMENTS:

LONGVIEW GENERAL BUSINESS #169125 - ACTIVE

LICENSING RESTRICTIONS:

Not licensed to hire minors without a Minor Work Permit.

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Vikki Smith

Director, Department of Revenue

UBI: 600464147 001 0001

COWLITZ COUNTY TITLE CO.
COWLITZ COUNTY TITLE CO
1159 14TH AVE
LONGVIEW, WA 98632

STATE OF WASHINGTON

UNEMPLOYMENT INSURANCE -
ACTIVE
INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE
LONGVIEW GENERAL BUSINESS
#169125 - ACTIVE

Expires: Nov 30, 2018

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit

Department of Licensing

PO Box 2957

Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here **13a** _____

Company/Agency name Progressions Credit Union		Website progressionscu.org	
Contact name. Primary applicant and contract manager Nanette Edgett-Janssen	(Area code) Telephone number 509-444-0473	Email (required) nanettee@progressionscu.org	
Contact name 2 (if applicable) Mari Zumbiel	(Area code) Telephone number 509-622-2019	Email (required) mariz@progressionscu.org	
Physical address of business (number and street) 2919 E Mission Ave			
City Spokane		State WA	ZIP code 99202
Mailing address of business (if different) 2919 E Mission Ave			
City Spokane		State WA	ZIP code 99202
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) 601133758
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We are a financial institution that provides savings and lending (including vehicle and vessel loans) to our members.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>We will not use this information to contact owners nor will we disclose any information from the records. This information will only be used to verify current ownership for lending purposes and to verify we have been added as legal owner when the vehicle is used as collateral for a loan.</p>			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Nanette Edgett-Janssen

PRINT or TYPE Name

X

Signature of business or organization representative

12/28/2017 Spokane WA

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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If you currently have a CPS number, enter it here

13a

Company/Agency name JAGUAR LAND ROVER BELLEVUE INC		Website jaguarbellevue.com	
Contact name. Primary applicant and contract manager CRYSTAL HALLEN	(Area code) Telephone number (425)373-9222	Email (required) crystal.hallen@autocenternw.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 13817 NE 20TH ST			
City BELLEVUE		State WA	ZIP code 98005
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) <div style="background-color: black; color: white; padding: 2px 10px; font-weight: bold; display: inline-block;">6d</div>	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). NEW AND USED AUTO SALES AND SERVICE			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. WE WILL NOT CONTACT THE OWNER OR ANYONE ELSE OR DISCLOSE INFORMATION FROM THE CONTRACTED PLATE SEARCHES.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

CRYSTAL HALLEN

PRINT or TYPE Name

X

Signature of business or organization representative

12/8/17 BELLEVUE, WA

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)**Each data broker or reseller must:**

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

Vehicle/Vessel On-line Access Contract Application-CPS

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Email (quickest)
cps@dol.wa.gov
Print and scan or upgrade to
Adobe Reader XI or above to fill it in
and save it.

Mail
Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax
(360) 570-7895

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If you currently have a CPS number, enter it here _____

Company/Agency name UNITED FINANCE INDUSTRIAL LOAN CO.		Website UNITED FINANCE.COM	
Contact name. Primary applicant and contract manager DATRICK HENNESSEY	(Area code) Telephone number 360-425-3333	Email (required) LONGVIEW@UNITEDFINANCE.COM	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1070 14TH AVE			
City LONGVIEW		State WA	ZIP code 98632
Mailing address of business (if different) PO BOX 207			
City LONGVIEW		State WA	ZIP code 98632
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). WE WILL BE TRACKING LIEN PERFECTION REGARDING OUR COLLATERAL, GETTING UPDATED CUSTOMER/VEHICLE INFORMATION WHEN POSSIBLE (I.E. SHIP TRACE), PRINTING REGISTRATIONS			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. WE WILL BE LOOKING AT OUR CUSTOMERS INFORMATION. WE WILL BE CONTACTING THEM IN REGARD TO THEIR ACCOUNT OR ITS RELATED INFORMATION. WE WILL NOT DISCUSS THEIR INFORMATION WITH A THIRD PARTY WITHOUT THEIR AUTHORIZATION TO DO SO.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private Investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

COWLITZ 11-14-2017 DATEICH HENNESSEY
Date and place (county) signed PRINT OF TYPE Name Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087



STATE OF
WASHINGTON

BUSINESS LICENSE

Corporation

UNITED FINANCE CO.
UNITEDFINANCEINDUSTRIALLOANCOMPANY
1070 14TH AVE
LONGVIEW, WA 98632

TAX REGISTRATION - ACTIVE

Unified Business ID #: 409012143
Business ID #: 001
Location: 0001
Expires: Oct 31, 2018

CITY ENDORSEMENTS:

LONGVIEW GENERAL BUSINESS #818670 - ACTIVE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

STATE OF WASHINGTON

UBI: 409012143 001 0001

Expires: Oct 31, 2018

UNITED FINANCE CO.
UNITEDFINANCEINDUSTRIALLOAN
COMPANY
1070 14TH AVE
LONGVIEW, WA 98632

TAX REGISTRATION - ACTIVE
LONGVIEW GENERAL BUSINESS
#818670 - ACTIVE

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If you currently have a CPS number, enter it here

13a

Company/Agency name Strategic Intelligence Services, LLC		Website www.strategicintel.com	
Contact name. Primary applicant and contract manager Thomas E. Stotts	(Area code) Telephone number (509)230-6176	Email (required) tom@strategicintel.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 1312 N. Monroe St., Ste 254			
City Spokane		State WA	ZIP code 99201
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) 602-139-622
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>Private Investigations and Service of Process. I will utilize vehicle registration information to locate and identify persons and vehicles for Litigation or service of process.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>I may contact owners for litigation purposes and service of process only. I may provide registration information to attorneys for permissible legal purposes.</p>			

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
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 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Tom E. Stotts

PRINT or TYPE Name

X

Signature of business or organization representative

11/09/2017 Spokane, WA

Date and place (county) signed

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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- Maintain a legible Subscriber Roster and complete all fields
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In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name Strategic Intelligences Services, LLC	Contact name Tom Stotts	Email tom@strategicintel.com	(Area code) Phone number 5092306176
	Address, City, State, Zip code 1312 N. Monroe St., Ste 245, Spokane, WA 99201		Subscriber's permissible use Legal investigations an service of process.	
	Does the subscriber provide information to an attorney or private investigator? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
3	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
5	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
6	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
7	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			

Use additional copies of this page, if needed. You may create your own Subscriber Roster as long as it contains all of the data fields on this form.

Vehicle/Vessel On-line Access Contract Application-CPS

Use this form to apply for access to the Contracted Plate Search (CPS) service. Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

cps@dol.wa.gov

Print and scan or upgrade to

Adobe Reader XI or above to fill it in
and save it.

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Do not use this form for personal or individual record requests.

Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information as permitted by law. There is no guarantee your request will be approved. See Authorities at the bottom of Page 2 of this application.

If you currently have a CPS number, enter it here _____

Company/Agency name PROGRESSIVE CASUALTY INSURANCE COMPANY		Website	
Contact name, Primary applicant and contact manager BRIAN ANDERSON	(Area code) Telephone number (253) 733-4289	Email (required) brian.anderson@progressive.com	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 34001 PACIFIC HIGHWAY S			
City FEDERAL WAY		State WA	ZIP code 98003
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). PROGRESSIVE CASUALTY INSURANCE COMPANY AND ITS CORPORATE AFFILIATES WRITE AND SERVICE INSURANCE POLICIES COVERING VEHICLES AND VESSELS.	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. YES, WE WILL CONTACT OWNERS FOR THE PURPOSE OF INVESTIGATING INSURANCE CLAIMS. WE MAY CONTACT THE OWNERS BY MAIL, EMAIL, TELEPHONE OR IN PERSON.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of one of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of one of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/17/2018
Date and place (county) signed

BRIAN ANDERSON
PRINT or TYPE Name

X 
Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

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PO Box 2957

Olympia, WA 98507

Fax

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If you currently have a CPS number, enter it here

13a

Company/Agency name NORTH SOUND AUTO GROUP, LLC dba DWAYNE LANE'S CJDR		Website WWW.DWAYNELANE.COM	
Contact name, Primary applicant and contract manager SHANTEL HARRIS	(Area code) Telephone number (425) 551-5406	Email (required) SHARRIS@DWAYNELANE.COM	
Contact name 2 (if applicable)	(Area code) Telephone number	Email (required)	
Physical address of business (number and street) 10515 EVERGREEN WAY			
City EVERETT		State WA	ZIP code 98204
Mailing address of business (if different) SAME AS ABOVE			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI) 602-868-344
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). NORTH SOUND AUTO GROUP, LLC IS AN AUTOMOBILE DEALER. WE PURCHASE, SELL AND SERVICE NEW AND USED VEHICLES IN ADDITION TO SELLING AUTOMOTIVE PARTS.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. WE WOULD ONLY INITIATE CONTACT WITH ANY CURRENT/PREVIOUS OWNER(S) IF THERE WAS A POTENTIAL TITLING ISSUE OR DISCREPANCY IN LEGAL AND/OR REGISTERED INFORMATION PROVIDED TO US VERSUS WHAT IS ON RECORD WITH DOL. CONTACT ALSO BE INITIATED IF THE VEHICLE HAPPENED TO BE ABANDONED ON DEALERSHIP PROPERTY. CONTACT MAY BE MADE VIA PHONE, E-MAIL, OR REGULAR MAIL DEPENDING ON THE CONTACT INFORMATION WE HAVE AVAILABLE.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the State seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. Contact cps@dol.wa.gov to request a sample notification letter.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties —RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

12/12/2017 SNOHOMISH

Date and place (county) signed

NORTH SOUND AUTO GROUP, LLC

PRINT or TYPE Name

X

Signature of business or organization representative

Shantel M. Harris

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Subscriber Roster (Data brokers/resellers applying for CPS must complete and return this section)

Each data broker or reseller must:

- Maintain a legible Subscriber Roster and complete all fields
- Record all subscribers
- Document the specific permissible use qualification for each subscriber
- Retain Subscriber Roster and notification letters sent by subscribers for the term of the Contract and for three (3) years from the date of disclosure or termination of the contract, whichever occurs first.

Your contract and/ or CPS access may be terminated if you do not maintain a complete and legible Subscriber Roster.

In the Subscriber's permissible use box, describe the DPPA defined permissible purpose for access to personal information contained in the records. For example, "information is used in the processing of insurance claims investigations." A vague answer, such as, "check who owns the vehicle," is unacceptable.

1	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
2	Legal business name	Contact name	Email	(Area code) Phone number
	Address, City, State, Zip code		Subscriber's permissible use	
	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
4	Legal business name	Contact name	Email	(Area code) Phone number
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	Does the subscriber provide information to an attorney or private investigator? <input type="checkbox"/> Yes <input type="checkbox"/> No			
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STATE OF
WASHINGTON

BUSINESS LICENSE

Limited Liability Company

NORTHSOUND AUTO GROUP, LLC
DWAYNE LANE'S CHRYSLER JEEP DODGE
10515 EVERGREEN WAY
EVERETT, WA 98204-3867

UNEMPLOYMENT INSURANCE - ACTIVE
MINOR WORK PERMIT - ACTIVE
MOTOR VEHICLE DEALER #1282 - ACTIVE

Unified Business ID #: 602868344

Business ID #: 001

Location: 0001

Expires: Oct 31, 2018

INDUSTRIAL INSURANCE - ACTIVE
TAX REGISTRATION - ACTIVE

DUTIES OF MINORS:

WASH CARS, FILING, PHONES, LOT ATTENDANT

LICENSING RESTRICTIONS:

It is the business's responsibility to comply with minor work permit requirements. See WAC 296-125-030 and WAC 296-125-033 for non-Agricultural and WAC 296-131-125 for Agricultural guidelines and restricted activities.

Minors employed in maintenance and repair work must be at least 16 years of age. WAC 296-125-033(5)(a)

REGISTERED TRADE NAMES:

DWAYNE LANE'S CHRYSLER JEEP DODGE

This document lists the registrations, endorsements, and licenses authorized for the business named above. By accepting this document, the licensee certifies the information on the application was complete, true, and accurate to the best of his or her knowledge, and that business will be conducted in compliance with all applicable Washington state, county, and city regulations.

Director, Department of Revenue

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If you currently have a CPS number, enter it here **13a** (IVIPS)

Company/Agency name Specialized Investigations, Inc. DBA - SI Investigations,		Website www.specialpi.com	
Contact name. Primary applicant and contract manager Richard Haver, Vice President	(Area code) Telephone number 800-714-3728 x177	Email (required) richardh@specialpi.com	
Contact name 2 (if applicable) Peter Schiffrin, President	(Area code) Telephone number 800-714-3728 x113	Email (required) pschiffrin@sgdinc.com	
Physical address of business (number and street) 100 West Harrison Street, Suite N-350			
City Seattle		State WA	ZIP code 98119
Mailing address of business (if different) 9171 Gazette Avenue			
City Chatsworth		State CA	ZIP code 91311
Provide one of these identifiers	Taxpayer Identification Number (TIN) 6d	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). Our company established in 1981 as a full service investigative agency. The various types of services including asset and financial investigations, surveillance, and activity checks, insurance fraud claim investigations, labor and employment, health care fraud, and various types of general investigative services.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We will only contact the owner on occasion to interview them regarding an insurance claim (e.g. auto accident, stolen vehicle, or other auto-related claims). We will <u>not</u> contact them for commercial purposes; we may provide the information to an insurance company who insures the owner with auto coverage.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners— RCW 46.12.635(1)(c).

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CPS RECORD FEES: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

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- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

1/24/18 (Los Angeles County)

Date and place (county) signed

Richard Hareer

PRINT or TYPE Name

X Richard Hareer

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725.
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If you currently have a CPS number, enter it here

13a

Company/Agency name Ballard Parking LLC		Website ballardparking.com	
Contact name. Primary applicant and contract manager Gloria Villanueva	(Area code) Telephone number (206) 789-5010	Email (required) gloriav@olympicathleticclub.com	
Contact name 2 (if applicable) Rachel Edland	(Area code) Telephone number (206) 789-5010	Email (required) rachele@olympicathleticclub.com	
Physical address of business (number and street) 5301 Leary Ave NW			
City Seattle		State WA	ZIP code 98107
Mailing address of business (if different)			
City		State	ZIP code
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN)	WA Unified Business Identifier (UBI) 603061741
<p>Answer the following</p> <p>Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records).</p> <p>We are a parking company who manages lots, issues tickets, collects fees. We use the CPS to find the registered owners of vehicles with unpaid parking tickets.</p>			
<p>Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information.</p> <p>We contact the registered owners by mail by sending a notice of outstanding parking tickets.</p>			

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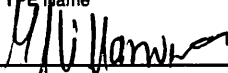
Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

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Submit the following documentation with your application:

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- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

<div style="text-align: center;"><u>1/3/18</u> Date and place (county) signed</div> <div style="text-align: center;"><u>KING COUNTY</u></div>	<div style="text-align: center;"><u>GLORIA VILLANUEVA</u> PRINT or TYPE Name</div> <div style="text-align: center;"><u>X</u>  Signature of business or organization representative</div>
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Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Vehicle/Vessel On-line Access Contract Application-IVIPS

Use this form to apply for access to the Internet Vehicle/Vessel Information Processing System (IVIPS). Businesses and organizations use this service for 24-hour-a-day access to individual vehicle and vessel records via the internet. Submit your completed, signed application by email, mail or fax, and allow 14 business days for processing.

Email (quickest)

ivips@dol.wa.gov
Print and scan or upgrade to
Adobe Reader XI or above)

Mail

Vehicle Records Disclosure Unit
Department of Licensing
PO Box 2957
Olympia, WA 98507

Fax

(360) 570-7895

Phone

(360) 359-4001

Do not use this form for personal or individual record requests.
Use the Vehicle or Boat Record Request forms located at dol.wa.gov/forms/formspd.html

We are committed to protecting personal information. Records and personal information are released in compliance with the federal Driver Privacy Protection Act of 1994 (DPPA), and Washington State laws. These laws restrict redisclosure of personal information obtained from vehicle and vessel records, and protect owners from unsolicited business contact. Authorized recipients may only redisclose information or contact owners as permitted by law. There is no guarantee your request will be approved. See authorities at the bottom of page 2 of this application.

If you currently have an IVIPS number, enter it here _____

Company/Agency name First-Citizens Bank & Trust Company		Website None	
Contact name, Primary applicant and contract manager Karen Ashe	(Area code) Telephone number (919) 716-7564	Email (required) Karen.Ashe@firstcitizens.com	
Contact name 2 (if applicable) Maria Lucas	(Area code) Telephone number (919) 716-4299	Email (required) Maria.Lucas@firstcitizens.com	
Physical address of business (number and street) 100 East Tryon Road			
City Raleigh		State NC	ZIP code 27603
Mailing address of business (if different) PO BOX 26592			
City Raleigh		State NC	ZIP code 27611
Provide one of these identifiers	Taxpayer Identification Number (TIN)	Employer Identification Number (EIN) 6d	WA Unified Business Identifier (UBI)
Answer the following Provide a detailed explanation of your primary business activity (exactly what your business or agency does and how you will use the vehicle and vessel records). We are a financial institution making consumer & commercial loans securing vehicles/vessels. We utilize your system using vin research to confirm/verify lienholder information.			
Will you contact the owner for any purpose, provide the registration record information to an attorney or private investigator, or to any other persons or businesses? Use this space to describe how you will contact the owner or disclose the information or state that you will not disclose it and will not contact the owner. This is required information. We will not disclose or contact the owner unless the account we are securing the vehicle/vessel on goes into default and requires further actions be taken by our Collections Department to render a resolution to the loan being secured.			

You may not use the personal information contained in a vehicle or vessel registration record for unsolicited business contact. Unsolicited business contact means a contact that is intended to result in, or promote, the sale of any goods or services to a person named in the disclosed information. Disclosure of names and addresses of individual owners — RCW 46.12.635(1)(c).

When disclosing a vehicle or vessel registration record to a private investigator or an attorney, you must provide a notice to the owner, to whom the information applies, that the request was granted. The notice must comply with RCW 46.12.635(4) (a)(b)(c), describing you as the disclosing entity, and must be mailed to the owner within 5 working days of disclosure. You may not use DOL's name, logo, addresses, telephone numbers, email addresses or the state seal in your notification letter. You must retain a copy of the notification letters for three years from the date of disclosure, or from the date of termination of your contract, whichever occurs first, and produce copies of the letters upon a request by the DOL. Failure to send a notification letter is a violation of your contract and Washington State laws. A sample notification letter is at the DOL website: <https://fortress.wa.gov/dol/ivipsprod/ContractForms.aspx>.

The sale or other distribution of any vehicle or vessel owner name or address to another person not disclosed in your request or application is a gross misdemeanor punishable by a fine not to exceed ten thousand dollars, or by imprisonment in a county jail for 364 days, or by both such fine and imprisonment for each violation. Disclosure violations, penalties — RCW 46.12.640.

Knowingly making a false statement or concealing a material fact required in this application or making false representation to obtain any personal information from an individual's motor vehicle record is also subject to federal criminal fines under the DPPA.

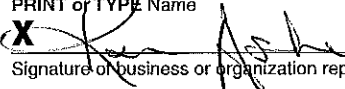
IVIPS record fees: There is a 4-cent fee per record search, and businesses must pay an additional \$2 for each record accessed. Government entities are exempt from the \$2 fee. Contract holders are invoiced monthly.

Submit the following documentation with your application:

- **Washington State business** – Attach a legible copy of your current business license
- **Business outside Washington State** – Attach a legible copy of **one** of the following:
 - Your current business license or
 - A letter signed by the owner or authorized representative indicating you are their agent. The letter must include your Federal Employer Identification Number (EIN) or Federal Tax Identification Number (TIN)
- **Non-profit organization or corporation** – Attach a legible copy of **one** of the following:
 - Your Articles of Incorporation, filed with the Secretary of State or
 - Your Tax Exempt Status, (501)(c)(3), from the Internal Revenue Service
- **Attorney** – Attach a legible copy of your current bar card, or proof of current/active bar status in your state.
- **Private investigator** – Attach a legible copy of your current private investigator license.

By signing or typing your name, you are certifying under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

10/16/17 Wake County, NC
Date and place (county) signed

Karen Ashe
PRINT or TYPE Name

Signature of business or organization representative

Authorities:

Federal Driver Privacy Protection Act of 1994 (DPPA) 18 U.S.C. §2721 through §2725
Revised Code of Washington (RCW) 42.56, RCW 46.12.630, 635, 640; RCW 88.02
Washington Administrative Code (WAC) 308-10-075, 308-93-087

Redactions have been made as appropriate per statute and are noted below.

EXEMPTION #	EXEMPTION	EXEMPTION EXPLAINED
6d	5 RCW 42.56.230(4); 42 U.S.C. § 405(c) (2) (C) (viii) (I); RCW 42.56.070(1).	RCW 42.56.230(4); 42 U.S.C. § 405(c) (2) (C) (viii) (I); RCW 42.56.070(1). Personal Information – Tax ID. Information required of any taxpayer in connection with the assessment or collection of any tax (Social Security Number) is protected from disclosure.
13a	RCW 42.56.420(4) Security – Computer and Telecommunications Networks-	Information regarding the infrastructure and security of computer and telecommunications networks, consisting of security passwords, security access codes and programs, access codes for secure software applications, security and service recovery plans, security risk assessments, and security test results to the extent that they identify specific system vulnerabilities
END	END	END